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BULLETIN

OF

The National Association for the Study and Prevention of Tuberculosis

Vol. IV

OCTOBER, 1917

No. 1

Plans for a Three Million Dollar Seal Sale

Red Cross Seal Prospects

The Mail Sale

Pennant Competition

Modern Health Crusader Competition

Under the unprecedented demand from state and local associations as agents for seals, the Red Cross has already (September) distributed thirty million more seals than up to Christmas in 1916. The Illinois Tuberculosis Association has ordered 6,000,000 more seals than ever before. The St. Louis Association will place 4,000,000 more seals on sale than in 1916 for that city and county alone. The State Charities Aid Association, general agents for New York state except New York City, has gauged its campaign for an increase of 3,000,000 above its record state sale of 1916. The executive secretary of the Tennessee Anti-Tuberculosis Association anticipates a sale of 2,000,000, double the 1916 sale.

The opinion seems almost universal among Red Cross Seal agents that this is par excellence the best year for the sale. The higher cost of living and increased taxation are more than offset by the aroused generosity and patriotism of the public. A word of caution is advisable, however. In order to take advantage of the unique opportunity offered this fall, it is essential that every agent bring out in his publicity and in his appeals to individuals the fact that tuberculosis is one of the worst enemies of armies, that it is one of the greatest weakening influences to our country at war, and that the proceeds from the seal sale are used in a practical patriotic way to protect and rehabilitate our soldiers and the supporting civilian population. We recommend for every agent large optimism, backed up with careful planning, in the campaign and the hardest work of which he is capable. With this combination from now to January first in every state and local agency it would be possible to raise the needed \$3,000,000, trebling the sale of last year.

"Buy three times as many seals as last year," "You must buy three times as many," or "We must treble the sale

LATER ANNOUNCEMENT

Mail Sale letters to go for 2c if posted locally

Postoffice regulations just issued direct that under the new tax law raising the first-class postage rate to 3c. per ounce, effective November 2d, first-class letters mailed for local delivery within the territory of the postoffice where they are mailed will be delivered by city and rural carriers for two-cent postage. Letters posted in the territory of one postoffice addressed to persons in the territory of another postoffice require three cents.

This regulation permits the Red Cross seal agent covering several towns to mail his sale letters with only two-cent postage on each envelope, the outgoing and the return provided he send letters in bulk from his headquarters to be mailed by a local representative in the postoffice for each city, town or district representing a distinct postoffice territory in which addressees reside. If a large city is served by two main postoffices, no mere branch postoffices, the agent must see that letters for addressees in either of the two postoffice territories be mailed in that postoffice.

The regulation issued in regard to postcards states that private mailing cards which are entirely in print or bear no more writing (or typewriting) than is authorized upon printed matter will continue to be mailable for 1c. each for delivery anywhere as hitherto. All government postcards and all private mailing cards bearing written or typewritten messages require 2c. in stamps after November 1st. It is our understanding that the standard follow-up cards and acknowledgment cards issued by the National Association, at least if signatures are printed, will go for one-cent postage.

At the time this goes to press, we have not received confirmation of the above regulations from the Postmaster General, but their wide publication west and east seems to indicate that they are authoritative throughout the United States. Pending our further announcement, the seal agent should inquire at his own postoffice.

this year," are slogans that should be sounded everywhere this fall. "War increases tuberculosis," is a fact that must be hammered in and riveted.

It is vitally important that local agents speedily order all the seals they are willing to try to sell, in order that the state agents may pass on the orders to the Red Cross before it is too late to print more seals. *All orders for supplies must be filed at the earliest possible dates* because of delays to be expected in transportation under railway and express service congestion.

The Mail Sale Postage

In point of method the mail sale should be the chief reliance of the agent. The lists of addressees for the letters should be greatly extended, care being taken in selecting persons likely to buy 100 or more seals and in phrasing the appeal along lines adapted to their class.

The prospect of three-cent postage—if the pending law takes effect before the sale of seals—should not cause any one to cut down the number of his mail sale letters. It is wise to send just as many letters on a good list as can be financed. A great many agents have the foresight to borrow money to pay for mail sale letters. Some mail sale lists of considerable size have yielded on the average more than \$1.00 for each letter sent out. A calculation of the average return from 23 lists in 23 different cities and villages shows a return of 50.7 per letter.

On the question of covering costs, suppose the agent puts down seven cents or eight cents per letter, including two two-cent stamps. As shown in the mail sale circular, the National Association is having letters produced for agents at 63 cents each in lots of 5,000. If the cost, however, were eight cents and the three-cent postage law caused two cents more to be added (one cent more on each of the two envelopes), making ten cents, experience in past years indicates that the returns will far more than cover cost. With the spe-

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BULLETIN OF
THE
NATIONAL ASSOCIATION FOR
THE STUDY AND PREVENTION
OF TUBERCULOSIS

Published Monthly

In the Interest of Workers Engaged in the
Anti-Tuberculosis Movement by
THE NATIONAL ASSOCIATION FOR THE
STUDY AND PREVENTION OF TUBERCULOSIS
105 EAST 22ND STREET, NEW YORK CITY

Vol. IV October, 1917 No. 1

Entered as Second Class Mail Matter October 21, 1914,
at the Postoffice at New York, N. Y., under the Act
of August 24, 1912.

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Prize Awarded in Story-talk Contest

In the contest for story-talks, the prize has been awarded to Mrs. Louise F. Brand of the Wisconsin Anti-Tuberculosis Association. Her timely story, "Serving Uncle Sam," was selected by the judges as the talk to be given by teachers to their children on Modern Health Crusade Day, December 7th.

It was hoped that two stories could be awarded prizes as the best for children respectively under and over ten years of age. But no story seemed distinctively adapted to the older group. Mrs. Brand's story, however, was considered interesting and instructive both to children over and under ten, and both of the \$5 prizes have been awarded to her.

The judges were hampered in giving full consideration to several stories by their excess in length beyond the 1,500-word limit set in the announcement of the contest. All the stories were of an excellent order and it is planned to publish one or more of them in *The Journal of the Outdoor Life*.

Red Cross Seal Percentages

The National Association has just issued a new pamphlet No. 108, "Red Cross Seal Percentages." This pamphlet contains a study of the percentages charged by state agents and local agents, and takes up some of the problems raised by the study including the different bases of percentages charged, the variation in percentages, etc. In the conclusions drawn from the study, the National Association says that a standardization of percentages is not possible or desirable.

As the matter of awards and commissions to be allowed in the 1917 seal sale is now uppermost, anti-tuberculosis workers will be interested in a comprehensive plan recently made public by the Minnesota Public Health Association. This plan is as follows:

I. A nurse experienced in all branches of public health for (1) school health work, or (2) a tuberculosis survey, or (3) infant welfare work, or (4) all combined, will be furnished free with all necessary supplies (includes all expenses) for one week to any town or county for every 7,000 seals sold; or

II. A physician experienced in all branches of public health work for (1) an intensive health survey, or (2) a sanitary survey, or (3) medical school supervision, or (4) infant welfare work, or (5) all these combined will be furnished free with all necessary supplies for one week to any town or county for every 20,000 seals sold; or

III. Fifty per cent. of the seal receipts may be used locally for approved health work (provided net proceeds amount to at least \$100.00); or

IV. Both a nurse and a physician will be furnished on a pro rata basis as stated above.

Organizations which retain a percentage for local work must set aside as a local tuberculosis war campaign fund 50 per cent. of the excess of sale over that of last year; however, local war funds amounting to less than \$300 shall be grouped by the State Association into one state tuberculosis war campaign fund, as a less amount will not be sufficient to carry on an adequate local campaign.

Organizations selling over 200,000 seals may retain 75 per cent. for approved anti-tuberculosis work; organizations selling over 500,000 seals may retain an additional one-half of one per cent. on each succeeding 100,000 for the next 500,000 and one per cent. on each 100,000 thereafter until a maximum of 85 per cent. is reached.

Results of Negro Work in Atlanta

In the August issue of the BULLETIN Miss Rosa Lowe, of Atlanta, described "Tuberculosis Work Among the Negroes" as carried on by the Atlanta Anti-Tuberculosis Association, of which she is secretary. Following the special campaign of education in the negro districts of the city, Miss Lowe summarizes the work as follows:

"Clinics were held in nine different locations and there were 616 negroes examined at these places. Three hundred and fifty-six were referred to the clinic of the Atlanta Medical College, where special arrangements had been made for them to report with a card of entrance, showing that they were referred from this clinic; 92 were referred to the Anti-Tuberculosis Association; 67 were sent to the Southern Dental College for work on their teeth; 40 were sent to private physicians; 32 were sent to the Grady Hospital clinic; 33 were found in good condition, and there were others, whose cases were cared for in other ways.

"District workers visited 3,786 homes, leaving literature and giving advice and making inspections, thereby reaching 13,004 occupants. Supervisors' meetings were held twice daily, followed by meetings of workers and chairmen. Public meetings were held in churches, where physicians spoke on health to the congregation. Prior to and during the campaign 54 speakers addressed 27 churches and Sunday-schools to a total of 30,000 persons on two Sundays. Stereopticon slides and lectures were given on health at the Odd Fellows Auditorium, where over 1,300 people attended. Six thousand public school children were reached with literature distributed to both day and night schools. A total of 45,234 people were reached. Allowing 25 per cent. for duplications, this leaves 33,925 persons affected by the campaign previous to the holding of the clinics. A total of 44 public meetings were held.

"It is needless to say that this clinical work was not only a means of education and help to the negroes themselves, but it also increased greatly the interest of the white people in the sickness problem of the negroes.

"Quoting from the report made by H. H. Pace, the chairman, 'The results are beyond tabulation. There is now an effective organization of men and women who have realized that through concerted effort much good can be done for the negro race.'

Scrubbing Up Pegasus

By PAUL L. BENJAMIN

Secretary Minneapolis Tuberculosis Committee

One of the most interesting features of "The Health and Happiness Week" conducted in Minneapolis last December was the "Health Poetry Contest," carried on in the public schools. The previous year a "Health Play Contest" had been staged with considerable success. In order to vary the contest and to take advantage of the crest of popular interest in poetry, verse was substituted as the *modus operandi*. That the "Health Poetry Contest" was a decided success was evidenced by the hundreds, yes, thousands, of poems written; by the space given it by the Minneapolis Journal, which made a special feature of it; and by the interest taken by parents and teachers. This interest was largely the result of wide publicity and a careful campaign plotted out months previously. Here is how we did it:

In the first place three of the best critics of poetry in the country, namely, Miss Harriet Monroe of Chicago, editor of "Poetry," William Stanley Braithwaite of Cambridge, Mass., editor of "The Poetry Review," and Henry A. Bellows of Minneapolis, editor of "The Bellman," were asked to serve as the final judges. This they not only consented to do, but also supplied photographs of themselves for the press. Their names lent dignity to the contest and were also of considerable publicity value. Next, Prof. G. M. Thomas of the University of Minnesota secured eleven students, many of whom had won college distinction for ability in writing, to act as the preliminary judges, thus taking this burden from the office and adding another excellent publicity feature.

Meanwhile the writer had written to a number of prominent poets asking them to contribute an original health poem. The last paragraph of this letter was as follows: "Poems might deal with any phase of health or anything which makes for physical vigor, such as The Wood Trail, The Tang of the Woods, The Dive, Swimmin', etc.; or it might be a poignant personal experience, such as that suffered by a consumptive who is fighting the disease among the cactus plains of Colorado; it might be an arraignment of society for its apathy in these matters, as, for instance, poor housing, unsanitary factories, wan faced children, etc."

In response to this letter poems were received from the following: Sara Teasdale, Arthur Guiterman, Grace Fallow Norton, Lyman Bryson, Joseph Warren Beach, Grace Denio Litchfield, Clement Wood, Theodosia Garrison, Christopher Morley, Horace Holley, Winifred Welles, Helen Cole Crew, H. Thompson Rich, and Vachel Lindsay. The letters that came with these poems

warmed one with new strength for the fight. A quotation or two from these letters will show the spirit of them all. Mr. Rich, Associate Editor of the Forum, wrote, "Accept this from me as my small part of a great human effort," and Mrs. Crew wrote, "Wishing you the greatest success in your good work." At this point it is germane to quote several of these poems, especially ones which have an obvious bearing on the campaign against the white plague.

Winifred Welles, who has contributed to *The Journal of the Outdoor Life*, wrote the following poem:

FROM A SLEEPING PORCH

All day on the stones of the pathway I hear them
walking below,
The happy heels and the strong heels, the swift
feet and the slow.
Some step forth as to laughter, and some are shod
as with pain,
Gaily they go in the sunshine or wistfully with the
rain.
But they all belong to folk upright, and not to
those like me,
Who have to lie and look at life horizontally!
Once, long ago my feet were like theirs, they went
whither I desired,
They were lured, they followed and found, they
danced and they were tired.
But now their gypsying is done, and I have only
instead
Two small peaks in a blanket at the far end of the
bed.

But at night when the world goes in to sleep and
only the moon and I
Are left to swing in the silence side by side in the
sky.
And the old, maternal mountain is comfortably
near,
Is it a whisper from her that I always seem to hear,
When, no more weary of weariness, lonely or fear-
ful or sad,
I rise up straight in the midnight, strong as of old
and as glad,
And I run down the wide, white meadow whichever
way I choose,
And my feet clink over the starways in a pair of
crystal shoes!

Lyman Bryson contributed this original poem:

THE WINDS

Come out of the fever-laden breath
That taints the dark slum street with death,
Come where the skies are pure and kind,
Come into the winds of God.

Ye, whose dim eyes see no dawn,
Whose hearts beat fainter as days drag on,
Who know no rest for body or mind,
Come into the winds of God.

There is healing and peace in the woods and hills,
There is cool sweet air that kindles and thrills,
When the streets of pain are left behind,
Come into the winds of God.

The most poignant poem of all was this epigrammatic one by Horace Holley:

Ill health—the heart's unseen Gethsemane;
Ill health—the mind's unknown insanity;
Ill health—a prison round the spirit built
Deeper than Judas' sin, than Nero's guilt.

Of course these poems formed the nucleus for wide publicity in the press. A further impetus was the action of the School Board in setting aside its ban against contests of any kind in the public schools. In addition, the superintendent gave information about it in his bulletins to the teachers. Miss Gratia Countryman, the chief city librarian, also helped by having distributed through the libraries and schools printed slips giving a list of books on poetry. Large placards were placed in the settlement houses and in the fourteen or more branch libraries. Further, a letter was written to each English teacher in the city, giving the rules for the contest and asking for their cooperation. These rules were:

First: The poem must be upon some phase of health. This may be construed to mean anything which makes for better physical conditions, such as: A Hike Through the Woods, The Camp Fire, The Race, Fishin', anything which is an arraignment of present conditions which make for ill health—such as Tenements, the Cigarette, The Red Flagon; anything which is helping to change bad conditions, as The Red Cross Seal, The Visiting Nurse, or any personal experience.

Second: The poem may be in any accepted medium of verse, vers libre among them.

Third: Each poem should be signed with a nom-de-plume accompanied by a sealed envelope containing the author's name and address and sent to Paul L. Benjamin, 25 Old Chamber of Commerce.

Fourth: The time limit for the contest will be five o'clock December 5, and all poems must be in the hands of Mr. Benjamin by that time.

Fifth: The winners will be announced in the Minneapolis Journal either Sunday, December 24 or 31.

Sixth: A "grand prize" will be given for the best poem. First prizes will be given for the best poem by a high school girl, a high school boy and a first prize for the best poem by a grammar school pupil. Other poems will also receive prizes.

Seventh: The judges are Henry A. Bellows of the Bellman, Miss Harriet Monroe, editor of "Poetry" and author of "You and I," and William Stanley Braithwaite, editor of "The Poetry Review" and Anthology of Magazine Verse.

The prizes consisted of thirty dollars in cash (which was contributed) and subscriptions to a great variety of magazines, such as St. Nicholas, The American Boy, Boys' Life, The Storytellers' Magazine, Everyland, Our Dumb Ani-

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Tuberculosis Week

Over 150,000 associations, clubs, schools, churches and other organizations helped last year to spread the gospel of good health during Tuberculosis Week. This annual educational movement, conducted under the direction of The National Association for the Study and Prevention of Tuberculosis, comes this year during the week of December 2d to 9th. The National Association has provided for three special days: Medical Examination Day, Thursday, December 6th; Modern Health Crusade Day, Friday, December 7th; Tuberculosis Sunday, which may be observed at the beginning or end of the week, December 2d or 9th.

Medical Examination Day may well be particularly stressed. Never before in the history of the world has the importance of physical fitness been so clearly revealed by thorough medical examination as in these days of war and of army mobilization. Hundreds of thousands of men who had for years thought themselves perfectly fit have been rejected from military service because of defects or impairments of the body which they had never suspected. And the tragedy of this situation is that, in by far the greater percentage of cases, these diseases could have been avoided by a periodic medical examination at least once a year. Medical Examination Day on December 6th will be an effort to induce every man, woman and child to have an annual examination.

Modern Health Crusade Day, December 7th, will give an opportunity to interest children, through the schools, in the tuberculosis and public health movement, by means of plays, talks and motion pictures.

Tuberculosis Sunday, the culmination of the week's campaign, has in past years and will this year reach Jew and Gentile, Protestant and Catholic, and all possible religious groups within these organizations. It is not necessary that special sermons be preached on tuberculosis; a brief talk in connection with some service or an oral or printed announcement is sufficient to answer the requirements.

The days from December 2d to 9th is a time when an endeavor should be made to interest clubs, lodges, granges and civic and social bodies in the subject of tuberculosis. The fundamental aim of Tuberculosis Week is educational, but there is no doubt that an intensive campaign of eight days will increase the sale of Red Cross Seals.

Special circulars on Medical Examination Day, Modern Health Crusade Day and Tuberculosis Sunday may be secured, in most cases without charge, from the secretaries of local anti-tuberculosis associations or, if this is not possible, from the National Association.

War Work of the National Association

The war work of the National Association against tuberculosis, as it has thus far developed, is along two lines:

First, discovering tuberculosis among enlisted and drafted men, and not alone those who have been rejected, but those who are accepted for service. It has become manifest that many men with active tuberculosis have passed the examining boards. This is because of the necessity for rapid and therefore very cursory, if not careless, examinations, and because many general practitioners are not trained to detect tuberculous lesions.

All applicants for enlistment in the United States Marine Corps who have been rejected since January 1st because of phthisis have been reported to the National Association by direction of the commandant at Washington. These names are being sent to the state or city boards of health where the applicants reside.

Ex-patients in sanatoria or at dispensaries who have been drafted and accepted for the army are being reported to the National Association, and the information in turn is being reported to the proper military authorities for investigation.

Those rejected by the local examining boards have had their rejection slips filed with other rejections for physical disability. In many states it has been quite impossible for health officers or anti-tuberculosis agencies to get at these lists. The status of the boards in their relation to the Governor and the Federal Government has not been clearly defined for them. In only two states that we know of, namely, Massachusetts and North Carolina, has the governor over his own signature requested local boards to report tuberculosis to the state board of health.

The attention of all anti-tuberculosis associations is called to the importance of a letter which has just been received from the office of the Provost Marshal General in Washington. This letter makes it possible to secure the names and addresses and other information regarding those who were rejected by local or district exemption boards because of pulmonary disease or suspected tuberculosis or because of under weight, which may be the result of tuberculosis. This should uncover many thousands of unknown cases. It is hoped that all state and local boards of health will make it possible for the non-official agencies, such as anti-tuberculosis associations, dispensaries, sanatoria and visiting nurse organizations, to co-operate with them in following up these rejected conscripts with instructions and service. The letter reads as follows:

WAR DEPARTMENT

OFFICE OF PROVOST MARSHAL GENERAL
WASHINGTON, September 29, 1917.

The National Association for the Study and Prevention of Tuberculosis,
105 East 22d St., N. Y. City.

GENTLEMEN:

I am directed by General Crowder to inform you that the Provost Marshal

General is in complete sympathy with the work of your Association. He thinks it would be an excellent thing if the physical examination records of the several Local Boards were made easily accessible to your representatives or to representatives of the State Boards of Health acting in co-operation with you. He does not desire, at this time, to direct the Boards through the Governors to this effect because it has been necessary to establish and adhere to the policy of addressing Governors only upon matters essentially important to the immediate administration of the Selective Service Law. However, the Regulations provide that the records of Local Exemption Boards be made accessible to the public at such time as will not interfere with the work of these Boards. Should this general authority not prove sufficient the Provost Marshal General has no objection to, and, in fact, advocates the presentation of a copy of this letter to the Governors of the several States to the end that the Governors give such special directions as may be necessary in order that the data desired for your Association may be collected.

By direction of GENERAL CROWDER:

Allen W. Gullion, Lt. Col.,
Judge Advocate, Asst. Exec. Officer.

Secondly, an educational program has been tentatively mapped out and begun at Camp Devens, Ayer, Mass., and Camp Bartlett, Westfield, Mass. Through the Y. M. C. A. Camp Director of Education, acting in co-operation with the Massachusetts Anti-Tuberculosis League, literature on tuberculosis will be distributed in the nine service buildings.

Twenty to thirty-minute talks, of an informal, snappy, non-technical character, will be scheduled in these buildings. Lectures for military surgeons by the foremost specialists on tuberculosis will be arranged for later. The surgeons at Camp Devens are interested in arranging for tuberculosis clinics at the base hospital, to which they will invite the non-military physicians in the neighborhood. They have expressed themselves as interested in reciprocal clinics to be arranged by the neighborhood doctors. It is hoped that such reciprocal clinics will be held at all the cantonments.

Arrangements have been made through the Community Motion Picture Bureau for routing motion picture reels on tuberculosis in all the camps and cantonments. About 400 screens are thus made to serve the purpose of education.

It should be clearly stated that in carrying on this work the National Association is acting wholly through and in co-operation with the anti-tuberculosis associations and state boards of health.

Many channels of information are open to and permits obtainable by the National Association which might not be so readily available to state associations. All data thus received will be passed on to the organizations of the several states and they will conduct such campaigns as seem to them best adapted to local needs.

A Program of County Work for a State Visiting Nurse*

By MARY C. NELSON, R. N.

The work of a state visiting nurse may be under the auspices of the organization that has charge of the tuberculosis campaign in the state, either the state Board of Health, or the state Anti-Tuberculosis Association. In some states it has been inaugurated by the offer of the services of a visiting nurse for a month as a prize to certain counties selling the greatest number of Red Cross Seals per capita, and this has stimulated and increased the sale of the seals.

The secretary of the State Association arranges the state appointments by correspondence with the local committees who have charge of the sale of the seals in each county. The secretary also gives the nurse the names of the chairmen of these committees, and this serves as her official introduction to the county. After this introduction she should correspond personally with the chairmen whose duties are to make arrangements for her room and board, to plan a tentative program of work, and to co-operate with her during her stay in the county.

A room in a private family, with board in the same house, or nearby, is more desirable than living in the average small town hotel, and more reasonable, and often gives the nurse the personal touch with local conditions which proves helpful in her work.

Her headquarters should be in the county seat, as it is the center of population and activities, and enables her to get the "atmosphere" or "point of view" of the community, as a whole, more effectively than elsewhere.

The state secretary should send to each chairman a general outline of the work on which the program is to be based, with certain suggestions as to hours on duty and the necessity for conservation of the nurse's strength. An afternoon a week and, where Sunday work is planned, another whole day of rest should be part of the schedule. Each county feels the importance of its own problems and the committee is apt to forget the nurse is only human and that she has the same problems to solve in every county, while the nurse is anxious to accomplish as much as possible in the time allotted, and may overwork. The state secretary should keep in close touch with her program and exercise a certain amount of supervision over her work. The following is a sample of the way in which a schedule for a month may be kept:

DATE	MORNING	AFTERNOON	EVENING
July 1	{ Farragut school	Woman's Club	Committee meeting
July 2	{ Lincoln school	Washington school	
July 3	Visits	Ladies' Aid	{ Methodist Church
July 4	Visits	Visits	
July 5	{ District school	District school	{ Grange
July 6	{ District school	District school	{ Evening meeting
July 7	Visits	{ 1/2 day for Nurse	{ District school

There should be some publicity work done before the arrival of the nurse, personal items as to the nurse's previous training, experience, etc., to create an interest in the campaign. The counties that have worked for and won the prize will be interested in knowing some facts about the nurse and what she is going to do. School children, especially, are apt to become nervous over the prospective visit of the nurse, and it is well to allay their fears by giving a definite outline of her program.

The salary is paid by the state association for the month in the prize counties, and the counties pay the traveling expenses. Those counties who failed to win the prize may have the nurse by paying both salary and traveling expenses, the length of her stay being determined by the amount of money in the treasury from the seal sale. Frequently the prize county keeps the nurse an extra month by paying both salary and traveling expenses. The salary is usually \$100.00 a month and traveling expenses, while the nurse pays her own living expenses.

On arrival in the county the real work begins:

1st. There should be a meeting of the local committee to discuss the objects of the campaign and to plan a definite program of work.

2d. The nurse must make a survey of local conditions.

3d. To do this she should meet the men and women of the town who have the community interests at heart:

- a. Health officer.
- b. Physicians.
- c. Superintendent of schools.
- d. County school commissioner and county agent.
- e. Judge of probate.
- f. Clergymen of all churches.
- g. Leading business men and women.

h. Women's clubs, Ladies' aids, societies of all kinds, as Masons, Eastern Stars, Odd Fellows, Granges, Farmers' Institutes, and any organization whose influence will be of service in winning the good will of those through whom results are to be secured.

4th. Personal interviews with the members of the Board of Supervisors, the Poor Commissioners, and any other county officer who may have to do with the administration of county affairs.

The campaign being principally educational in its character, the message must be spread as widely as possible.

1st. Health talks to all grades in city, village and rural district schools, from the kindergarten through the high school. The hearty co-operation of the superintendent of schools and of the county school commissioner is absolutely necessary to make this phase of the work a success.

2d. Special talks to teachers, and in the county normals, emphasizing the importance of their own personal hygiene and the need of a physical examination for tuberculosis.

3d. Medical inspection of the children for physical defects may be made with the consent of parents and the Board of Education. It is advisable to have the health officer or some physician present at these inspections to give emphasis to the findings. The nurse should be very conservative in her decision as to the presence of physical defects. One mistake in finding tonsils where an operation has been performed, even though they have only been clipped, will cast a doubt on her whole work.

4th. Concrete evidence of the needs of the community must be presented. To obtain this evidence the nurse must visit the homes of patients suffering from tuberculosis to know the conditions under which they are living. A list of these cases, with the names of the family physician, will be gotten from the health officer. As a matter of professional etiquette she should call on each physician and secure his co-operation and consent before visiting his patients. It may be necessary to give bedside care to the sick, assist in obstetrical work, to hold mothers' meetings, organize Baby Welfare Weeks, Good Health Exhibits, and make Sanitary House Inspections; in fact to be prepared in every way to meet any demand made upon her, "to be instant in season and out of season," to accomplish in a short time permanent results of her efforts.

Adaptability and tact are indispensable. To be a "good mixer," to take things as they come, willing to make the best of everything, will help essentially in making the campaign a success.

* This paper is based largely on Miss Nelson's experience as State Visiting Nurse of the Michigan Anti-Tuberculosis Association.—THE EDITOR.

Program for a City of Twenty-five Thousand Population

By MISS MARY VAN ZILE, Beverly Public Health Dispensary, Beverly, Mass.

In 1911 the Massachusetts legislature passed a bill by which every city of ten thousand or over was required to establish and maintain a dispensary for the discovery and care of indigent tuberculosis patients. Apparently little heed was taken of this law until 1915, when the State Commissioner of Health notified the cities of this class that if, by June 1, 1915, they had not established the required dispensaries, they would be called upon to pay the fine of \$500.

A few especially progressive citizens of this city, wishing to conduct the work of the dispensary on the most constructive lines, set about at once, organizing an anti-tuberculosis society, with the purpose of making a survey of the tuberculosis situation and conducting the organization and administration of the dispensary in conjunction with the city Board of Health.

A nurse was paid for two months by Red Cross seal funds to make a preliminary study of the situation and to prepare a tentative program for continuation work.

Between May 10th, 1915, and July 1st the anti-tuberculosis society considered carefully the framing of the policy for health work, to be recommended to the mayor and city council. As an outcome of this a commission was appointed by the mayor, composed of the three members of the Board of Health and seven representatives of the anti-tuberculosis society. They were sworn in to supervise the work of the dispensary and to be responsible for the spending of the appropriation (\$2,300). A skilled diagnostician was engaged for the clinic service at \$100 a year, and a full-time nurse, to serve as executive secretary, at \$1,000 a year. It was decided to work under the name Public Health Dispensary.

A suite of three rooms was engaged in a central location, with the essential requirement of southern exposure, suitable plumbing and sufficient space. The necessary equipment was bought and on July 1st the first clinic was held.

Two years' work on this basis has shown the need of the dispensary in the community. Over 400 patients have been under its care, representing about 300 families, and the community has expressed its interest by co-operation in many ways.

Having demonstrated the need and won the confidence of our supporters, it is now incumbent upon us to do more intensive health work and to continue the more constructive part of our program.

In contrast with other dispensaries our difficulty has not been that of persuading patients to attend the dispensary, but of giving them adequate care and attention when the diagnosis had been made and treatment prescribed.

Of the 90 patients with positive tuberculosis, the incipient cases can be sent to one of the four state sanatoria, but because of the great demand for beds they must wait from six weeks to two months before being admitted. In the meantime they are apt to become moderately advanced or so much improved that they see no need of leaving home. For the moderately advanced and advanced cases provision is made at the Lynn Tuberculosis Hospital, pending the time when the county hospital shall be furnished. The nursing care and food at Lynn are good, but the location so poor that the patients' complaints of dampness and monotony of scene are considered quite reasonable. The difficulty of this situation will no doubt be greatly relieved by the addition of sufficient beds in the county hospital to release the sanatorium beds for early cases.

We hope also that by directing the educational work in connection with the county hospital to co-ordinate the work on a county basis.

In the meantime if an outdoor camp could be maintained for waiting patients and for children needing special care our efficiency would be greatly increased. It is possible that an old boat may be used for this purpose on the waterfront or a house in the outskirts of the city.

The discrepancy, however, in the care of the patients when at home, either before or after sanatorium instruction, is the inadequacy of the home visiting service. To prevent the spread of the disease and to encourage the constant attention to prescribed treatment every positive case should have, as routine, at least one visit from the nurse a month. Some cases require more, and developments from week to week give special cause for extra visits of advice, such as to rearrange outdoor sleeping quarters, to give instruction in cleaning and preparation of diet and in the care of the children. The visiting of 90 patients is alone the full-time work of one nurse.

On the first Thursday evening of each month a class for returned sanatorium cases, somewhat after the plan of Dr. Pratt's class, has been found to be an inspiration and encouragement to those continuing treatment at home. The exchange of ideas and plans acts as an incentive to greater effort. We hope this may develop into an active educational factor in the community, teaching these patients to spread the gospel of sanatorium treatment and the need for precaution at home.

The intensive work of the clinics needs careful supervision on two afternoons and one evening a week. Tuesday afternoon is devoted chiefly to mothers bringing young children below the school age. The Wednesday after-

noon clinic is given over to school children who are sent by the school nurse and others to be examined. From the dispensary they are referred to other specialists or agencies if necessary. While waiting their turn the children are given corrective exercises by a specially trained worker, and we hope later to be able to employ her regularly for our defective posture cases.

This brings us to the large field of preventive cases, where much must be done along educational lines. By taking small groups of children as they attend the clinic, teaching personal hygiene by pictures and talks and pamphlets, we hope to increase the health of these dispensary children. Hygiene slips in the early grades of the schools have been introduced by the association. These are filled out by every child for one week each month, serving as a reminder and habit former, also giving the child a frequently much needed standard in cleanliness and healthy living.

In view of the fact that by compelling children to attend school the state takes the responsibility of producing wage-earning citizens, it is of economic value to each community to conserve the health of the children while of school age. One of the necessary factors here is the use of fresh-air classes, which can be provided at small cost by fitting into each classroom window three adjustable frames. The equipment of extra blanket bags and overshoes should be furnished by the school department.

We hope to extend the influence of the dispensary gradually far beyond the treatment of the patients themselves or even the rehabilitation of the families, and become a strong educational factor in the city. Later, also, to extend our activities to the county, reaching the districts within reach of the county hospital.

The medical fraternity, recently formed, has urged upon the city government the appointment of a full-time health officer, and the dispensary commission has recommended to the Board of Health the selection of a graduate of the school for health officers of Harvard Technology.

The dental clinic, equipped during the last year by a special appropriation, should be passed over to the direction of the school committee, which now regulates the attendance of the children and the record keeping.

The problem of relief is one to be systematically dealt with. We expect to get together a representative committee of all agencies doing relief work in the city, so that, by adopting the use of the confidential exchange conducted by the S. P. C. C., we may use with more discrimination the funds available for this purpose.

A practical solution of this problem

for all who prescribe relief and for those who furnish it would seem to be the employment of a nurse with domestic science training to direct the spending of relief money and the careful use of the food bought.

For the consideration of economic problems, such as housing, sanitation, household economy, factory conditions, milk supply, etc., it is proposed to gather together a committee of the prominent workers in each line, manufacturers, merchants, real estate agents, members of the board of trade and the city government, to consider the necessary steps for city improvement along health lines.

Co-ordination of nursing forces seems most desirable, and will no doubt be greatly to the advantage of the school nurse, the district nurse and the dispensary nurse. As these individual nurses increase their clientèle the work will be found more and more to overlap.

Social service agencies, including playgrounds, Boy Scouts, Camp Fire Girls, clubs of different kinds, have been brought together by health exhibits, and this co-operation must be systematically used for educational purposes.

Summary of Program

1. Continuous educational work by means of literature, newspaper publicity, talks, exhibits, motion pictures, etc., for adults and children.
2. Increase of hospital beds for advanced and moderately advanced cases.
3. Appointment of a full-time health officer.
4. Provision of open-air classes in schools.
5. Additions to the nursing force for adequate home supervision.
6. Regular employment of supervisor of posture class.
7. An outdoor camp for waiting patients and returned sanatorium patients, also for children needing supervision.
8. The transfer of dental clinic to the school committee.
9. Employment of nurse housekeeper, preliminary to organizing relief work.
10. Appointment of civic committee to direct constructive city improvement.
11. Co-ordination of nursing forces.
12. Co-operation of social service agencies for extensive educational work.



Crusaders' Department

A November Meeting

While the regular meetings of Modern Health Crusader leagues on the subjects given in the Modern Health Crusader circular come only once in two months, leaders in the movement in various states are recommending additional special meetings, and some advocate regular monthly meetings. The BULLETIN will accordingly from time to time publish suggested programs for meetings intermediary to the six standard meetings set for the progressive recognition of leagues in the state and national regions.

The December meeting, subject: Tuberculosis and respiratory disease: How to prevent colds: Red Cross Seals, will be covered in the November BULLETIN just as the October meeting was in the September BULLETIN. For a special November meeting we recommend the institution of a simple military drill for both boy and girl crusaders. This will give an excellent form of physical exercise and mental discipline and will capitalize for their health the immeasurable interest all children now take in military matters.

An excellent drill manual, by Pirie MacDonald, may be obtained for 15 cents, postage prepaid, from the Boy Scouts of America, 200 Fifth Avenue, New York. This manual may also be purchased at principal headquarters for Boy Scouts.

We believe the manual will be self-explanatory to every league-master, man or woman, but, if not, local scout masters may be called on for assistance. No guns or sticks are required; the drill is for marching and for posture. Some leagues may wish to add a wooden gun or broomstick drill for arm and chest exercise. The military drill may be made a feature of every meeting with other numbers on the program, and up to Christmas at least a drill may well be held every week or fortnight. The drill company should be limited to crusaders, thus giving all boys and girls an incentive to do health chores or sell or buy seals as qualification.

One of the Modern Health Crusader

flags or pennants described in the crusaders' handbook (circular) will prove particularly useful to a league as a marching trophy.

National Competition

The National Association for the Study and Prevention of Tuberculosis, as directors of the National Legion of Modern Health Crusaders, will award ten handsome banners to leagues enlisting the most crusaders in ratio to population of their towns between October 15th and December 31st, and will publish the names of the winning leagues and league masters. For explanation, see the article on Red Cross Seals in this issue and the circular "Honors and Pennants, 1917," sent on application by your state association or the National Association.

Hat Pins

The National Association has had a quantity of the beautiful 1916 crusader shield pins made into hat pins. One of these will be presented to each of the first one hundred league masters applying who reports the number of crusader members, the territory (town, city, etc.) in which they reside, and the names of the officers. Preference for gold or silver pins should be stated.

Notes and Pointers

Under this heading the BULLETIN plans to publish news items on the progress of the movement and helpful suggestions from the leagues. Correspondence is invited.

More than 100,000 copies of the record of health chores, the "score card," have already been purchased by state and local associations for use of boys and girls in their homes.

Mrs. B. B. Buchanan, secretary of the Washington (State) Association for the Prevention and Relief of Tuberculosis, who has ordered 5,000 sets of crusader literature and insignia, writes: "I am delighted with the Health Chores idea. I think it is the best thing of its kind I have seen and it will work out splendidly with the ideas we have on the subject and the plans we have already made."

The Grand Rapids Anti-Tuberculosis Society reports the employment of a full-time worker for the Modern Health Crusader program in the schools.

The Virginia Anti-Tuberculosis Association reports that its field secretary is giving her attention to the crusade.

Mr. Murray A. Auerbach, secretary of the Arkansas Public Health Association, reporting on the leagues organized in that state, writes: "I regard the Modern Health Crusader movement as one of the greatest schemes for the general welfare of children that has yet been advanced."

With the printing of new and large editions of the Modern Health Crusader handbook, it is now possible for the National Association to quote \$5.50 per thousand for this circular, 55 cents per hundred. The state associations distribute them locally, usually without charge.

Scrubbing Up Pegasus

(Continued from page 3)

mals, The World's Chronicle, etc. These subscriptions were secured by writing to the editors of the various juvenile publications, stating the purpose of the contest, and asking for as many subscriptions as they could give.

The allurements of the many prizes, together with the heavy fusillade of publicity reverberating as it did from the press, the libraries and the schools, set the school population of over fifty thousand children to reading about health and then to writing verse about various phases of it. Literally, hundreds of poems were poured into the office. After considerable deliberation the judges made these awards: Jane Raze, "First Home"; Vivian F. Harthen, "Health"; Christine Frederickson, "Daddy's Remedy"; Viola Marquarat, "Industrious Germs"; Elizabeth Laws, "Canoeing"; Lucy Kenfield, "Health"; John LaVelle, "My Skates"; Warren Fetterly, "Health"; Gertrude Lovejoy, "Health"; Gertrude Moren, "The Fly"; Donna Blake, "Little Miss Tenement"; Emma Timberlake, "Dietetics"; Elsie Edstrom, "Health"; Anna Lincoln, "The Call of the Outdoors"; Eleanor McBride, "The Campers"; Lucille Quinn, "The Pine Tree"; Winnifred Mo, "The Flight of the Germs"; Dora Hyman, "A Beaming Heart"; Floyd MacKenzie, "Health Poem"; Kammila Aasen, "Tuberculosis."

Both Mr. Braithwaite and Mr. Bellows, independently of each other, selected "First Home," by Jane M. Raze, for the first prize:

FIRST HOME

Out in the woods where God dwells
And the wild bird sings his song,
Wherever the flowers bloom in the dells,
That is where I belong.

Out where the green leaves whisper
Their tale of the summer time,
Where every voice is a vesper
And every sound a chime.

Where the green of the lowland meadows
Stretches away to the hills,
And the hills fling out their shadows
Over the babbling rills.

There are the voices calling
By wandering feet to come,
Back to God's first dwelling,
Back to man's first home.

Of course, the primary object was to arouse a city-wide interest in health, and to do this in a unique way which would pique a child's curiosity. Mr. Bellows in an article on the contest, penned principally from the angle of its poetic value, writes on this point: "Of course the contest was undertaken by the committee in charge, mainly as a part of a health campaign, and the poets who supplied models so generously did so in order to contribute to the great national fight against tuberculosis. I can readily believe that the effort to produce these poems, with the specially provided models to stimulate and guide, may well have accomplished more in the way of genuinely interesting the children in healthy living than scores of talks and treatises."

Plans for \$3,000,000 Seal Sale

(Continued from page 1)

cially strong appeal made by this year's seals enclosed in a carefully phrased letter, we believe that the average remittances will be much larger than formerly, making the mail sale relatively more profitable, in spite of probably six cents postage for each letter. Tuberculosis associations should not hesitate to pay the two-cent tax for the support of our army and navy. It is well to remember that the mail sale has quadrupled the seal sale in some sections and was the principal factor in the practically doubling of the sale over the country in the last two years.

Honors and Pennants

The circular announcing the fourth annual national competition for pennants conducted by the American Red Cross and the National Association is now being distributed through the state associations. A sample will be sent on application to the National Association.

Ten banners corresponding to the ten population classes are offered for the largest sales per capita of population in the inter-city and -town competition. Villages, towns, counties and cities of all sizes are eligible. The winners will receive publicity amounting to a more valued prize than the silk banner.

In the inter-state competition three banners will again be awarded to the winning state associations in the three state groups. The new circular gives a comparison between the relative standings of all states in the 1916 sale and in 1915. To the list of the 1916 pennant winners in the inter-city and -town competition, a list of the holders of second and third places is added.

Certificates of Commendation

In the expectation of increased sales in all parts of the country, the standard number of seals per capita for the award of certificates of commendation has been raised from five to six. Last year 120 towns and cities sold seven or more seals per capita. The National Association will present a handsome certificate to the agents for all cities, towns, villages and counties which reach the "standard of six."

Modern Health Crusader Competition

A new feature in competition, explained in the Honors and Pennants circular, is the offer of banners for recruiting the most Modern Health Crusaders. The league that enrolls the largest number of crusader members in ratio to the population of town or city in which they reside, between October 15th and December 31st, will be awarded a banner by the National Association. To offset disparity in size, the villages, towns and cities are divided into the same ten classes as in the Red Cross Seal pennant competition and a banner is offered in each of the ten classes. In this competition recruits will be counted who qualify either by the sale or purchase of ten seals or by doing the health chores for one week. As children may purchase seals in every locality, even where they may not be privileged to sell them, it is felt that this competition is equitable for all.

Cuts and Lantern Slide

Herewith is a reproduction of a 6½ picas (one-half column) line cut of the 1917 Red Cross Seal. Local agents are urged to ask their state agent for a supply at once. Request the local papers to carry a seal story every day, with the cut of seal above the headline or set in the middle of the story.



Half-column cut of seal



Column cut of seal

The 13 picas or one-column cut shown above is also for newspaper use. Agents should bear in mind that both sizes of cuts are useful on all kinds of one-color printed matter. Make the seal well known in your territory.



Lantern slide for use in seal campaign

The above is a cut of the lantern slide which local agents are urged to place for exhibition in motion picture houses and other theatres. The originals are furnished in three colors. A supply may be obtained from state agents. Additional slides can be furnished by the National Association at 9 cents each.

BULLETIN

OF

The National Association for the Study and Prevention of Tuberculosis.

Vol. IV

DECEMBER, 1917

No. 3

Dates of Next Annual Meeting Fixed

The dates for the next annual meeting of The National Association for the Study and Prevention of Tuberculosis to be held in Boston have been fixed for June 6, 7, and 8, 1918. The American Climatological and Clinical Association will also meet in Boston on June 5 and 6. The National Association meeting will begin on the evening of the 6th and close at noon on the 8th.

The section chairmen are as follows: Clinical Section, Dr. Walter R. Steiner, Hartford, Conn.; Sociological Section, James Minnick, Chicago; Advisory Council, Dr. George Thomas Palmer, Springfield, Ill. The chairman of the Pathological Section will be announced later.

Modern Health Crusaders' Department



December is the month in which recruiting Crusaders is easiest. This month any child may qualify as a Crusader, become a squire or earn his spurs as a knight both by doing the health chores and by selling or buying Red Cross Christmas Seals. This two-fold opportunity to enlist will not come again until the last of 1918.

December Preparatory to 1918 Crusader Work

In order to extend the benefit of the Crusade to the maximum number of children next year, every league-master, teacher or other worker among children should now furnish them with seals to sell. After the close of the Seal campaign January 1st, those who have attained merely the lower ranks of Crusaders will find a natural incentive to take up the health chores in order to earn the higher titles and badges. The large number of Crusaders that can readily be enrolled this month will make the formation of new leagues easy and give new strength for the program of old leagues.

New Circular

The National Association is supplying a new two-page circular on Modern Health Crusaders free on application for distribution to teachers and league-masters. One side carries a direct announcement to children and should be posted for them to read. It pictures the badges and tells how to win them both by chores and by seals. The other side briefly describes the Crusade from the teacher's point of view. It points out that the badges need not be obtained in advance but promised to children to be

ordered after they have qualified as Crusaders. The Minnesota Public Health Association is distributing this circular among 15,000 teachers.

One Million Crusaders

Under the direction of the National Association, a drive is being conducted to secure one million members for the Modern Health Crusade this winter. The prospects are excellent for enrolling several hundred thousand Crusaders by December 31st.

Notes and Pointers

H. V. Slocum, Executive Secretary of the Vermont Association for the Prevention of Tuberculosis, writes that more than 7,000 Vermont children are keeping the health chore card records. The number of additional recruits to be secured through selling seals will undoubtedly give the Green Mountain State, one of the highest per capita enrolments of Crusaders.

The eager response children give to invitations rightly put up to them to become Crusaders is illustrated by reports from Washington State. Mrs. B. B. Buchanan, Executive Secretary of the Washington Association, writes: "Last Thursday I spent the day in Pierce County in the schools with the County Superintendent and we started more than a thousand boys and girls in the Crusade. . . . No feature of any previous campaign approaches the Crusader movement in popularity."

The Michigan Association recently telegraphed for 10,000 health chore record cards on a rush order. The Oklahoma Association ordering 5,000 of these "score cards," reports that there is a great demand for literature pertaining to the Crusader movement.

January Meeting

While the next meeting for Leagues with subject given in the Crusaders'

(Continued on page 4, col. 1)

"The Destroyer": A Tuberculosis Play

Under the direction and management of Lawrence Webber, the well known theatrical producer, a play entitled "The Destroyer," will be put on the stage in the near future. This is not a motion picture, but a straight theatrical production.

Anti-tuberculosis workers will be particularly interested in this play, which deals entirely with the problem of tuberculosis. It is a unique feature, putting on in a dramatic form much that is of real educational value to the general public and discussing very plainly some important problems that every anti-tuberculosis association should support.

The play will be produced in the most up-to-date and finished manner possible. The script of the play has been passed upon by the executive office of the National Association and the staging will also be similarly viséed. The promoters of the play are planning to open in the Broad Street Theatre, Newark, N. J., on Jan. 7. It will then be shown probably in Philadelphia, returning from there to New York for a run on Broadway.

This is a proposition in which the anti-tuberculosis associations of the country may well co-operate, not for any financial benefit, but because the educational value of the play is of real use to their communities. Critics of dramatic merit who are competent to pass upon matters of this character have said without hesitation, that the play is far stronger than "Damaged Goods," a somewhat similar play which had such a phenomenal run a few years ago.

(Continued on page 4, col. 2)

BULLETIN OF THE NATIONAL ASSOCIATION FOR THE STUDY AND PREVENTION OF TUBERCULOSIS

Published Monthly

In the Interest of Workers Engaged in the
Anti-Tuberculosis Movement by
THE NATIONAL ASSOCIATION FOR THE
STUDY AND PREVENTION OF TUBERCULOSIS
105 EAST 22ND STREET, NEW YORK CITY

Vol. IV December, 1917 No. 3

Entered as Second Class Mail Matter October 21, 1914,
at the Postoffice at New York, N. Y., under the Act
of August 24, 1912.

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Keeping the Tuberculous Out of the Army

The following letter has been sent to all state anti-tuberculosis associations for transmission to their local associations. It is designed to suggest a plan whereby the men in any community, who are known to be tuberculous and who are of draft age, may be exempted from military service.

"To Secretaries of State Associations:

"If the anti-tuberculosis agencies of the country are to do their part in the prevention of tuberculosis in the army, it will be necessary to take prompt action for the purpose of excluding the men who have the disease who will be called into service by the next draft. The classification of men under the new draft regulations will begin on December 15th and the actual drawing for military service will probably begin in January.

"Under the new selective service regulation (Section 11) the records of local examining boards relating to physical fitness are considered confidential and are not accessible to tuberculosis and other health agencies, public or pri-

vate. On this account, it is doubly imperative that those men who are known to be tuberculous be brought to the special notice of local examining boards, with a view to securing their exemption from active service.

"We suggest, therefore, that your association co-operating with the State Department of Health and such other agencies as may be necessary, secure from whatever sources may be available as complete a list as possible of all men of draft age who are known to be tuberculous. Such a list may be made up from the sources like the following:

- Records of state and local boards of health.
- Records of tuberculosis hospitals and sanatoria.
- Records of tuberculosis clinics.
- Records of charity organization societies and other relief agencies.
- Records of municipal and county poor authorities.
- Records of general hospitals and dispensaries.
- Records of visiting nurse associations, welfare departments of corporations and other health agencies.

"We suggest that you get in touch with each of these groups immediately and arrange to secure from them as complete information as possible concerning all men of whom they have any record between the ages of 21 and 31 who are known to be tuberculous. These lists should include not only men who are at the present time under treatment, but also those who have been under treatment in the past, whether discharged as arrested or cured, or for other reasons.

"Next we propose that these men be supplied with the proper affidavits, to be presented with the questionnaire provided by the local exemption boards. Care should be taken that the affidavits answer the questions relating to physical disability in Series II of the government's questionnaire, and that the affidavits are signed by physicians of known repute in the tuberculous field. In many instances, particularly in the larger centres of population, it may be worth while for local anti-tuberculosis associations to engage legal counsel to co-operate in the preparation of the papers.

"The plan suggested may seem to be a very cumbersome and expensive process. No doubt in some states where registration of living cases of tuberculosis is inadequate it cannot be carried out. On the other hand, the advantage of an effort of this character must be manifest. By this process you will at once be able to give to the examining boards evidence by which they may be able to classify tuberculous men so as to exclude them from military service. Somewhat similar methods were used successfully in certain states in the first draft. We trust you will pass along details of the plan to your local associations.

"Under the new arrangements for the draft, a chief physician with military rank will be in charge of all medical examinations in each state. We suggest

that you get in touch with this man in your state and put before him the claims of the tuberculous men and if possible work out a procedure for local examiners to use.

"We are conferring with Provost Marshal General Crowder and hope to be able to secure through him an order to all examining boards, instructing the chairmen of these boards to exclude from service those men who are shown to be tuberculous as per the procedure outlined in this letter.

"We will greatly appreciate any comments or suggestions that you may have to offer on the proposed plan. We will also appreciate it if you will let us know, in case you adopt this plan, something as to the results achieved."

Records of Exemption Boards Closed

The permission given by Provost Marshal General Crowder in a letter to The National Association for the Study and Prevention of Tuberculosis, under date of September 29th (see October BULLETIN) has been revoked. In this letter the National Association and its allied agencies were given permission to consult the records of local examining boards to ascertain information concerning cases of tuberculosis rejected by these bodies. Under the new Selective Service Regulations, effective November 20th, this permission is annulled. A copy of part of Section 11 of these regulations follows:

"All records required by these Rules and Regulations to be filed with and kept by Local and District Boards, Adjutants General, and other persons in connection with the registration, examination, selection and mobilization of registrants under the Selective Service Law, and these regulations shall be public records and shall be open during usual business hours for public inspection of any and all persons.

"PROVIDED, however, That the answers of any registrant concerning the condition of his health, mental or physical, in response to Series II of the questions under the head entitled 'Physical Fitness,' in the Questionnaire, and other evidence and records upon the same subject, and the answers of any registrant to the questions under Series X of the questions under the head entitled 'Dependency,' in the Questionnaire, except the names and addresses of the persons claimed to be dependent upon such registrant, shall not, without the consent of the registrant, be open to the inspection by any person other than members of Local and District Boards, examining physicians, members of Medical Advisory Boards, Government Appeal Agents, and other persons connected with the administration of the Selective Service Law and these Rules and Regulations, and United States attorneys and their assistants, and officials of such bureaus or departments of the United States Government as may be designated by the Secretary of War."

Early Evidence of Record-Breaking Seal Sale

A mass of evidence is being received by the National Association, showing that the 1917 seal sale promises to be a record-breaker. As this issue goes to press (December 5th) optimistic reports are coming in almost hourly by telegraph and mail, showing that state and local agents are having unexpectedly large demands for seals and supplies. A telegram from Miss S. S. Roberts, the Red Cross seal agent in Pittsburgh, sums up the situation in two words: "Sale unprecedented."

Never before in the history of the Red Cross seal campaign have agents placed so many re-orders with the American Red Cross. Several are received daily and many of them are accompanied by statements from the agents that their supplies have suddenly vanished and they are in need of more seals at once.

New York Reports Big Sale

The New York State Charities Aid Association reports that their original order for 40 million seals has been increased to 45 million, owing to the large demands from local agents and in spite of the fact that the original distribution was greatly in excess of that of 1916. Only two or three days after the opening of the campaign, local volunteer agents began writing in for more supplies, stating that all the seals sent them had been disposed of, and that they could sell from two to three times as many more. In the first five days of the campaign the Herkimer County agency sold nearly 30 per cent. of the total 1916 sale. The St. Lawrence County agency received \$550 in the first 850 replies to mail sale letters. The first 1,000 replies to mail sale letters sent from the central office to rural sections of the state brought back \$750, or an average of 75 cents per letter. This was approximately 100 per cent. increase over last year's rate of sale.

Oklahoma Working for First Place

Mr. Jules Schevitz, state agent for Oklahoma, wired on November 24th: "Muskogee over the top by raising \$5,000 in three days for state association." He added in a letter: "We are going to surprise all the members of Class B by taking first prize."

Mr. W. C. Nones of Louisville writes: "I have had good success in returns from special letters sent out this year, the returns from them being to date about double the returns last year."

Mr. D. E. Breed, state agent for Texas, wired for 500,000 more seals, and added, "Unusual demand all along the line."

Mr. West Boosts Plainfield

Reports from many sources are similar to that given by Mr. A. W. West of Plainfield, N. J., who telephoned to

double his order for Crusader buttons and pins. "When the sale began," he said, "we were at a loss to estimate whether it was going to be large or small, but we soon found out that the sale was going to break all records for Plainfield."

"Certainly, our sale is convincing evidence that the more people give, the more ready they are to give, and I believe that the Y. M. C. A. campaign and the other money raising campaigns have helped our cause immensely." (As this is being written, Mr. West called in person to place another order and to say that Plainfield would triple last year's sale.)

"The demand so far has been unprecedented here," writes Mrs. K. R. J. Edholm, state agent for Nebraska, who has already placed five re-orders for seals. Dr. R. G. Patterson wires from Ohio headquarters, "Have merely doubled local seal agencies in Ohio." From Mrs. R. S. Phifer, Jr., Mississippi agent, comes the brief but cheerful telegraphic comment, "Best sale yet." Mrs. E. P. Wanzer, Chairman Red Cross Seal Commission of South Dakota, says, "We are having a fine sale."

These are only a few of the many daily optimistic reports received by the National Association.

Children's Campaign

It is hoped that no community will fail to enlist the children in the Seal sale. If any city seems too large for children to sell seals under its teachers as agents, in spite of the successful example of Buffalo and Providence, it is to be hoped that arrangements will be made for a systematic sale at least to children, as in St. Louis.

For their own sakes, let the children participate in the seal campaign, in order to muster them speedily into the Modern Health Crusade. You know something of the success of this movement, which has gone beyond all expectations, if you have been reading the Crusaders' Department in the BULLETIN. In order to extend the benefit of the Crusade to all children possible in your territory through 1918, let them qualify as Crusaders now by selling seals. After the Seal campaign, Crusaders of lower rank will have incentive to earn higher titles and badges through the Health Chores. The more Crusaders enrolled in December, the more successfully can Leagues be formed and the educative work carried on.

A new two-page Modern Health Crusader circular has been written to meet the present opportunity. A year will pass before an equal opportunity comes. This circular is supplied free to state agents in such quantities as they will distribute on the basis of one to a teacher. Space is left on the circular, between the shield cuts, for you to print the address of your association.

Jules Schevitz, executive secretary of

the Oklahoma Association for the Prevention of Tuberculosis, is enthusiastic over the importance of the Crusader movement. "I find," he says, "that the Crusader scheme appeals to the people, especially those interested in children. I know that a liberal use of Crusader literature and insignia will produce very beneficial results in our Seal sale."

Miss Edith C. Johnson says in an editorial in the Daily Oklahoman, Oklahoma City, "Oklahoma is going to sell \$50,000 worth of seals before this Christmas. It wants to organize Health Crusade Leagues in every city and town in the state."

Effective Publicity

Many states are developing effective publicity to center attention on the sale. Two noteworthy examples are Alabama and North Carolina. Dr. George Eaves, secretary of the Alabama Anti-Tuberculosis League, has received a letter from President Wilson commending the work of the League. The President's letter reads:

"My dear Doctor Eaves:

May I not take the liberty of expressing to you my deep interest in the work you are doing in Alabama, and my sincere admiration of the spirit and efficiency with which it has been conducted? It is a cause in which the whole nation should be, and I believe is, interested. It is certainly one which is, in the view of every thoughtful person, of the most serious consequence to the whole country.

"Cordially and sincerely yours,
(Signed) "WOODROW WILSON."

Photographic copies of this letter have been distributed throughout the state. Dr. Eaves also has received warm support from Governor Henderson who has written personal letters to many persons in the state, calling on them to aid in the Seal sale. This letter says in part:

"The Anti-Tuberculosis League has been of interest to me since I have known of the excellent work they are doing to overcome the ravages of tuberculosis in Alabama, but I have lately been shocked to learn of the number of cases of tuberculosis discovered among the Alabama troops and the terrible death rate from this disease among our citizens. The War Department recognizes the fact based on the experience of our Allies that soldiers will break down with tuberculosis while in the trenches and must be returned to their homes. It is, therefore, the patriotic duty of every citizen to provide the funds for their cure, not only for the sake of the men, but to keep the disease from spreading. There are also thousands of other cases in the state which, if not treated, will cause not only their death but the infection of a large number of other people.

"I have been assured that at least every seventh death in Alabama is caused by tuberculosis. This is a terrible death rate. Alabama has been far

behind other states in fighting this enemy within our gates. Therefore, every citizen must realize our danger and help to win the fight."

Hon. T. W. Bickett, Governor of North Carolina, issued the following statement:

"This year a substantial portion of the proceeds of Red Cross Seals is to be devoted to the cure of our tuberculous soldiers. This simple statement should reach the heart of every patriot and every lover of his fellowman. I know our people will yield to the promptings of their better angels and with joyous generosity throw themselves into the campaign of the Red Cross Seal against the White Plague."

Follow-Up Cards in One-Cent Envelopes

While the follow-up and acknowledgment cards require two cents if mailed as postcards, they are mailable under one-cent postage if inserted in an unsealed envelope, and with no writing. On the basis of U. S. one-cent envelopes, this permits a saving of over \$8.00 per thousand, but it is probable that postcards not encased in envelopes will attract more attention. Owing to previous changes in postoffice rulings under the new law, it may be well for you to verify this one-cent provision at your postoffice.

Modern Health Crusaders'

Department

(Continued from page 1)

manual comes in February, a January meeting should be held in many towns. New members who do not receive their insignia in December may be decorated at a January meeting. Knights may be dubbed with some ceremony and the meeting made interesting in other ways. Besides health stories and plays, and drill marches, organized outdoor winter sports may be made a part of the program. Without elaborateness and with no great work the meeting can be conducted so as to make every Crusader an enthusiast.

A Tuberculosis Sign

The Atlanta Anti-Tuberculosis Association has prepared an attractive sign for its office. The sign is made of heavy galvanized iron, painted white, in the shape of a shield. At the top are the words "Anti-Tuberculosis Association" and under that a large double cross, the lettering and cross being in red. The sign is suspended by a black iron crane and is conspicuous and may be seen fully a half block away. The cost, including manufacture, installation and sign painting, was about \$18. A further detailed description of the sign may be secured from the Atlanta Anti-Tuberculosis Association, 23 East Cain St., Atlanta, Ga.

"The Destroyer"

(Continued from page 1)

It is frankly a propaganda play and will need the support of anti-tuberculosis associations to make it go. For this purpose, the management of the play will, through its advance men, approach secretaries of anti-tuberculosis associations in cities where the play is to be shown in the near future. Information and correspondence regarding the play should be addressed temporarily to Mr. Garland Gaden, New York City.

A brief synopsis of "The Destroyer" follows:

When very young, Doctor Lee married a girl of ethereal beauty, blissfully ignorant of the fact that her flower-like delicacy was the reflection of tuberculosis. She died. Their frail son had contracted the malady. Determined to restore his boy to health the physician became a specialist in the disease.

When the play opens, in the doctor's office, his son Frank has just arrived from a sanatorium, and Richard Wicks, a wealthy friend, drops in and tells the doctor that his daughter Alice is outside with Frank. The doctor reminds Wicks that he has informed him of Frank's ailment, and advised him to put Alice on her guard, so as to avoid any possibility of marriage; for although he had warned his son against marrying at the present time, he is afraid of the rashness of youth.

Wicks treats the matter lightly, as he considers that the doctor is a crank on the subject. But after he is shown some of the serious features of the disease he becomes awake to the possible danger to his only child. The two young people come in and it is discovered that they have been married for six months.

Wicks is thrown into a panic of fear and brutally bars the young husband from associating with his daughter, whom he takes to his home. Her father's actions shock Alice into her bed. Doctor Lee attends her and learns that she is not only infected with the disease but is on the way to become a mother. Frank invokes the law to obtain his wife. Wicks and the doctor quarrel, but the latter becomes the master and is finally left alone to find a solution. It is imperative that the young couple should continue to be separated and the doctor's wits will be taxed to the utmost to accomplish this result. Then, still more difficult, the baby, later on, must be taken from the mother for the good of both.

It is the working out of all this that makes the suspense and grip of the play. Wicks, meanwhile, has incited the hostility of people who live in his unsanitary tenements, among whom is a big-hearted Irishman, who, together with a faithful old housekeeper, furnish an abundance of delicious humor, through the unfolding of the very human story that ends in the highest happiness.

Membership Drive for National Association

Arrangements are being made for a big membership drive for The National Association for the Study and Prevention of Tuberculosis. An effort will probably be attempted for five thousand new members. While plans have not yet been perfected, the drive will probably start the latter part of January or the early part of February. Each state will be asked to be responsible for securing a certain number of members. Special literature, publicity material and other matter will be used in connection with the drive.

The present membership of the National Association is about 2,500. With the widespread interest in tuberculosis throughout the country, the National Association should have a membership of 10,000. To approximate this total will be one of the efforts of this drive. Local anti-tuberculosis associations should bear in mind that every member they secure for the National Association is a potential centre of interest for the benefit of their own work. The National Association does not attempt to take money out of the pockets of the local associations. It appeals only to those who are able to support both local and national work. On this account, every member of the National Association that a local organization gets helps the local work.

The Red Cross Seal campaign is rousing a tremendous interest in the tuberculosis movement. Now the iron is hot. It is the time to strike. The National Association believes that it can be of much greater service to the entire anti-tuberculosis movement if it has a larger budget. It appeals to the patriotism of local associations to this end.

Further details with regard to the membership campaign will be published in the next BULLETIN and will be announced in letters in the near future.

Readers of the BULLETIN are asked to submit to the office of the National Association any suggestions whereby this membership drive may be made effective.

Double Red Cross Holiday Ribbon

The Rhinehart Manufacturing Co., of New York, have put on the market an attractive holiday ribbon in which they have worked the double red cross design. The ribbons are manufactured in various widths and have a pretty mistletoe sprig with the double cross in red running between the sprigs. They are sold at practically all of the leading stores throughout the United States. The ribbon makes an unusually attractive decoration for holiday packages. The manufacturers of the ribbon have arranged to donate all of the net profits from the sale to The National Association for the Study and Prevention of Tuberculosis.

BULLETIN

OF

The National Association for the Study and Prevention of Tuberculosis

Vol. IV

JANUARY, 1918

No. 4

National Association Needs 5,000 New Members

The Executive Committee of the National Association has announced a campaign for 5,000 new members. This drive will be launched on February 4, 1918, and will continue until March 11. The co-operation of all BULLETIN readers in the plan is urgently needed.

The reasons that have influenced the National Association to start the campaign at this time may be briefly summarized as follows:

Reasons for Campaign

First—The membership of the National Association at the present time is only about 2,500. If the Association is going to be of the greatest usefulness in promoting interstate and federal programs for the control of tuberculosis and in assisting local and state organizations in their work, it must have a wider representation and more money.

Second—Demands upon the National Association for field and other special lines of service at the present time are so overwhelming that they cannot possibly be met unless its budget is increased from 50 to 100 per cent.

Third—The special demands upon the National Association because of the war have greatly increased the necessity for expansion of its scope of work. If these opportunities are to be realized, the most assured way of financing the work would seem to be by an increased membership.

Fourth—The rapidly developing anti-tuberculosis movement has enlisted a large and increasing number of men and women in every part of the United States. The National Association believes that from this group it will be a comparatively easy matter to recruit at least 500 members. It is the hope of the Executive Committee that the membership of the National Association will soon reach at least 10,000.

General Plan

The 5,000 new members have been apportioned in advance among different states as shown in the list below. Attention is called to the fact that in no state is the number apportioned likely to be burdensome or hard to secure. The apportionments are made upon the basis of population, taking into consideration the anti-tuberculosis work in the respective states. This quota for each state is as follows:

Apportionment of 5,000 New Members among State Associations

State	Present Members	Additional New Members Apportioned
Alabama	10	50
Arizona	11	25
Arkansas	4	50
California	87	175
Colorado	60	65
Connecticut	80	80
Delaware	7	15
Dist. of Columbia	64	20
Florida	11	20
Georgia	21	60
Idaho	2	20
Illinois	169	400
Indiana	38	175
Iowa	12	125
Kansas	4	75
Kentucky	25	50
Louisiana	10	25
Maine	14	40
Maryland	80	75
Massachusetts ...	204	230
Michigan	57	150
Minnesota	52	150
Mississippi		25
Missouri	24	175
Montana	7	25
Nebraska	10	50
Nevada		10
New Hampshire ..	8	30
New Jersey	76	200
New Mexico	19	25
New York (up state)	670	450
New York City..		125
Brooklyn		75
North Carolina...	29	75
North Dakota....	9	30
Ohio	101	350
Oklahoma	6	50
Oregon	21	30
Pennsylvania (except Alleghany and Philadelphia counties)	203	350
Philadelphia ...		100
Pittsburgh and Alleghany Co.		50
Rhode Island	37	40
South Carolina...	5	20
South Dakota....	3	30
Tennessee	11	75
Texas	29	175
Utah	5	25
Vermont	11	30
Virginia	20	50
Washington	31	50
West Virginia...	17	25
Wisconsin	36	175
Wyoming	1	15
Total		5,010

Literature and Service

Literature of various kinds, lists of names and other special service will be furnished to state and local associations in an endeavor to make the drive a success. The personnel of the executive office of the National Association will assist in every possible way in local and state campaigns.

Policy

In pushing the drive, the National Association will continue its customary policy of not carrying on any extensive appeal without the support of the anti-tuberculosis associations in the territory approached. The policy of the campaign will be to secure membership from those men and women who are financially able to support both local and national work.

Local Value of Campaign

Such a campaign for membership in the National Association cannot help but stimulate local anti-tuberculosis work. Every member of the National Association will be a more enthusiastic supporter of local work because he or she will receive stimulus and instruction from headquarters, and the dignity of membership in the National Association will be of additional service as well. Local and state anti-tuberculosis associations are, therefore, helping themselves by helping in this drive.

Co-operation

The co-operation of state and local anti-tuberculosis associations will be counted upon in making this drive a success. Secretaries of state associations have been urged to re-allot their apportionment to local associations, who in turn should follow a similar procedure.

Enclosure Slips

As one of the early steps in advertising the campaign, the National Association is having an enclosure slip printed for each state. This slip is designed for mailing as an enclosure with letters or with other circulars. It contains an announcement of the campaign and the reasons for it. Anyone who can use these slips may obtain a supply by writing to his state association.

Readers of the BULLETIN are urged

(Concluded on page 5, col. 3)

BULLETIN OF
THE
NATIONAL ASSOCIATION FOR
THE STUDY AND PREVENTION
OF TUBERCULOSIS

Published Monthly

In the Interest of Workers Engaged in the
Anti-Tuberculosis Movement by

THE NATIONAL ASSOCIATION FOR THE
STUDY AND PREVENTION OF TUBERCULOSIS
105 EAST 22ND STREET, NEW YORK CITY

Vol. IV January, 1918 No. 4

Entered as Second Class Mail Matter October 21, 1914,
at the Postoffice at New York, N. Y., under the
Act of August 24, 1912

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Red Cross Seals

Every local agent for Red Cross seals is urged by the National Association to make all collections of payments and unsold seals and to render his report and remittance to his state association just as soon as possible. Not only is there most urgent need for money to be put immediately to use in anti-tuberculosis work among troops and civilians, but the state and national associations have put out more money in the expenses of the campaign this year than hitherto. As a consequence, until payments come in from the recent seal campaign the association will be delayed if not more seriously hampered in their programs.

Preliminary reports on the sale from several widely separated parts of the country indicate that a total sale far larger than any previous year has been made. A more definite estimate will be given as soon as possible.

A New Year's Message from France

The *Monthly Bulletin* of the New York State Charities Aid Association for January contains a cable from Homer Folks, secretary of that association, who is now in France in charge of the Department of Civil Affairs for the American Red Cross. This message will be interesting and inspiring to all anti-tuberculosis workers in view of Mr. Folks' prominence in tuberculosis work. Mr. Folks' message is as follows:

Tuberculosis a Major Offensive

"You ask New Year's message for S. C. A. A. readers after five months in France. There is one—clear, emphatic, unescapable. It is this: Social ills in peace time become national calamities in war. Tuberculosis, infant mortality, venereal diseases, deserve attention in peace; but in war they must be met as major offensives. In Paris every week one death in every five is tuberculosis. Number of births greatly reduced. Infant mortality relatively favorable, but could be cut in half. Great refugee population in overcrowded quarters sowing seeds of future harvests of tuberculosis and reduced vitality.

What Commission is doing

"American Red Cross in France helping actively all these lines, in co-operation with French agencies, is moving hundreds refugee families from unhealthful into sanitary quarters; finishing unfinished tuberculosis hospitals; helping tuberculosis dispensaries; assisting in organizing training schools for health visitors; conducting medical examinations. Five hundred repatriated children received daily at Evian; conducting several children's hospitals and medical stations; starting a broad infant welfare educational campaign; making grants money and supplies to hundreds French and American organizations, officials and individuals doing relief and health work.

Helping to Win the War

"Civil Affairs Department aims to help win the war, and help to make it more worth while to win the war, by conserving life and vitality of those for whom the war is to be won. United States, about to undergo the strain of war, cannot afford to neglect any sound measures for health and social welfare.

Far more important than ever before to eliminate all unnecessary sources of disease and weakness. Reserve power American people fully adequate to both foreign and home demands."

A New Book List

The *Journal of the Outdoor Life* has issued a new edition of its circular entitled "Authoritative Books." The circular aims to list and describe with prices the best books on tuberculosis, especially those for the physician. No attempt has been made to make the list complete, but it includes a fund of valuable information, nevertheless, for the anti-tuberculosis worker. Copies of the circular will be sent on request to the *Journal of the Outdoor Life*, 287 Fourth Avenue, New York.

The following descriptions of new books added to the list in 1917 will give an idea as to the nature of the list. The books may be ordered from the *Journal of the Outdoor Life* at the prices listed.

THE PNEUMOTHORAX TREATMENT AND PULMONARY TUBERCULOSIS. By Clive Riviere, M.D., Lond F.R.C.P. Published by the Oxford University Press, London, 1917, in one vol., 186 pp., with 12 illustrations. Price, \$1.75, postpaid.

Dr. Riviere has performed a real service in bringing together under one cover in concise form the best information available concerning the use of artificial pneumothorax. His book deals with the mode of action of artificial pneumothorax; indications and contraindications for the use; apparatus required; technique of initial operations, effect of pleural adhesions; partial and complete pneumothorax; refills; physical signs in artificial pneumothorax; course of treatment and its termination; effect of pneumothorax on thoracic organs; pleurisy as a complication; gas replacement; accidents of pneumothorax treatment; general results to be expected; and bibliography.

CLINICAL TUBERCULOSIS. By Francis M. Pottenger, A.M., M.D., Ph.D. Published by The C. V. Mosby Co., 1917. Two vols., 1400 pp., with numerous plates and original engravings. Price, \$12.00, postpaid.

In this work Dr. Pottenger has given a complete treatise on tuberculosis, taking up the pathology, anatomy, diagnosis, prognosis, complications and treatment. The book is based primarily on Dr. Pottenger's clinical experience, and offers a good working library on tuberculosis, especially to the young practitioner, at a moderate cost.

(Concluded on page 8, col. 2)

Institute Dates and Program

The third annual session of the Institute for Tuberculosis Workers will be held at the New York School of Philanthropy under the auspices of that institution and The National Association for the Study and Prevention of Tuberculosis from June 10 to June 29, 1918. These dates immediately follow those of the annual meeting of the National Association at Boston, June 6, 7 and 8.

Objects

The Institute has four main objectives:

(1) To train workers who are already in executive positions in the anti-tuberculosis field to assume positions of greater responsibility, or to fit them to be of greater service in their present fields.

(2) To give workers who have not had experience in the anti-tuberculosis field a more comprehensive knowledge so that they can assume positions of executive responsibility in this field.

(3) To a limited extent, to give to volunteer workers in the tuberculosis field a more comprehensive knowledge of the administrative problems involved in the work.

(4) To aid in the standardization of methods and programs of anti-tuberculosis work.

Outline of Course

The following partial outline of the course gives only a very limited idea of the scope of the work undertaken.

I. METHODS OF ANTI-TUBERCULOSIS WORK:

(a) Educational Methods:

(1) Exhibits; (2) publicity; (3) literature; (4) special work with children; (5) special campaigns; (6) Red Cross Seals and fund raising.

(b) Organization:

(1) Constitution and by-laws; (2) working committees; (3) getting related groups to work; (4) personalities; (5) meetings of boards and committees; (6) office organization, files, records, etc.

(c) Dispensaries:

(1) Establishment, organization and equipment; (2) staff; (3) records; (4) costs; (5) functions, etc.

(d) Open Air Schools:

(1) Kinds of schools; (2) construction; (3) selection of children; (4) teacher; (5) length of stay and after-care; (6) feeding and clothing; (7) medical care and results.

(e) Nursing:

(1) How to get a good nurse; (2) the nurse and the dispensary; (3) urban vs. rural problems; (4) the nurse in the home; (5) the nurse in the community; (6) general vs. specialized nursing; (7) nursing as a public function.

(f) Institutional Methods:

(1) Anti-tuberculosis societies in relation to public and private institutions; (2) state vs. local hospitals; (3) operating a sanatorium or hospital; (4) follow-up and social service work; (5) hospital records.

(g) Industrial Work:

(1) Occupational mortality; (2) medical examination of employees; (3) employees' relief associations; (4) health work in factories; (5) health insurance.

(h) Co-operation with City and State Officials:

(1) With local boards of health; (2) with county boards of health; (3) with state boards of health; (4) with various city departments.

(i) Conduct of Conferences and Meetings:

(1) Arranging the program; (2) entertainment by local committees; (3) publicity and promotion; (4) mass meetings.

II. PROGRAMS FOR ANTI-TUBERCULOSIS WORK:

(a) Programs for Local Work:

(1) Education; (2) Hospitals and Sanatoria; (3) Dispensaries; (4) Nurses; (5) Open Air Schools; (6) Industrial Work; (7) Municipal Legislation; (8) Co-operation with city officials; (9) Inter-relation and co-operation; (10) Programs for small towns and rural communities; (11) Programs for large cities.

(b) The Framingham Community Program:

(1) The Framingham Idea; (2) The Framingham Community; (3) the Framingham Program; (4) Possibilities of the demonstration.

(c) Programs for State Work:

(1) Prevention of Infection; (2) increasing resistance; (3) care of curable cases; (4) working with local and state groups; (5) the functions of the state associations in relation to the State Board of Health.

(d) Program for the Nation:

(1) History of National Movement; (2) Policies of the National Association; (3) Methods of National Work.

III. RELATION OF THE TUBERCULOSIS CAMPAIGN TO OTHER SOCIAL AND PUBLIC HEALTH MOVEMENTS:

(a) Boards of Health.

(b) American Public Health Association.

(c) Infant Mortality Movement.

(d) Pure Milk Campaign.

(e) Housing Campaign.

(f) Temperance Movement.

(g) Labor Movements.

(h) Charity Organizations and Similar Societies.

IV. THE PSYCHOLOGY OF COMMUNITY ORGANIZATION.

Methods of Work

The Institute does not follow the usual class-room or lecture methods. The round-table conference with discussion prepared and directed by the conductor, is rather the method employed. Each of the various topics indicated in the foregoing outline will be presented by an expert in that particular line, and the subject will be thoroughly discussed by him and with ample opportunity for class discussions, comments and questions.

The mornings are given over to these conferences; in the afternoons the Institute visits and studies, with particular reference to their methods, various institutions and agencies engaged in tuberculosis work. In conjunction with the Institute a series of medical lectures by one or more speakers of national prominence is also given.

Fees and Expenses

The only charge for the Institute will be a registration fee of ten dollars. For living expenses in New York, it is desirable to allow about fifteen to eighteen dollars a week as a minimum.

Admission

Membership in the Institute is by invitation in every case. Those who are interested in attending should send their applications, with full information as to their experience and present work, to Philip P. Jacobs, 105 East 22nd Street, New York City. Invitations will be issued to not more than thirty. Preference will be given in extending invitations to those who make early application.

Modern Health Crusaders' Department



In December several army divisions of recruits were added to the Crusade, probably no less than 300,000. Enlisted by the sale of Red Cross seals more rapidly than would be possible by the health chores alone, these American children are ready to "carry on" in the Crusade. The extent to which they will acquire the health habits of Modern Health Crusaders and will carry out the 1918 program of health work depends to a large degree on the number of leaders who now come forward to organize the recruits into leagues, the companies of the Crusade army. January is the best month for organizing, while the interest aroused in December is fresh. All the children who have received or are entitled to the Crusader's certificate or insignia in a town where there is no league should be invited by their teacher, visiting nurse, Red Cross seal agent, or other adult desirous of helping children, to meet to form a League and elect officers.

Pennant Competition

The national Modern Health Crusader pennant competition is open to leagues organized this month no less than to leagues formed previously. The league that reports the largest number of members qualifying as Crusaders between October 15 and December 31, 1917, in ratio to the population of the town or city in which it is located will be awarded one of the ten pennants. The cities and villages of the country are divided into the ten population classes set in the Red Cross seal pennant competition, and a given league has to compete only with leagues in places within its class.

On or before February 1, 1918, the league master of each competing league must mail to the National Association at New York a report signed by him and by the marshal, captain or herald of the league, certifying the number and residence of Crusaders who have become members between October 15 and December 31, and have received their certificate cards. The report must include the estimated 1917 population of the city, village, town or township in which the members reside, and also the number of members qualifying by each of the two methods, chores and seals. The circular, "Honors and Pennants," giving full particulars regarding the competition, and a report form will be sent on request to the National Association, as well as the Crusaders' manual, which explains the manner in which a league is organized.

The Crusade and Other Organizations

Inquiries coming to us indicate that it is not plain to all that various children's organizations not formed as dis-

tinct Leagues of Modern Health Crusaders may take up the Crusade as a phase of their work, the health side of their program. Junior Red Cross Auxiliaries, Boy Scout Troops, Camp Fire Girls, and Junior Y. M. C. A. groups, as well as day schools and Sunday schools, may make Crusaders of their members who do the health chores, may distribute the insignia, enroll the qualified Crusaders as members of a league, and hold open sessions of Crusaders' meetings for the benefit of their entire membership. The Crusade plan will give members of other children's organizations an interest in health work which their own programs cannot engender.

February Meeting

The first of the regular bi-monthly meetings for 1918 listed in the manual comes in February. Subject: Home gymnastics. Folk dances. Methods of outdoor sleeping. Abundant literature is available through which even the most inexperienced league master can make the meeting fascinating for the Crusaders. The "Keep Well Stories" book (75c postpaid, from *Journal of the Outdoor Life*) has two pertinent stories: "Jack Frost" and "House that Jack Built." Home gymnastics should be taught at the league meetings. "Play and Athletics for Public Schools," published by the Virginia Department of Education, Richmond (15c), and the James Brown & Son Manual of Drill for Boy Scouts (30c, Boy Scouts of America, 200 Fifth Avenue, New York), give systems of simple gymnastics. A valuable and comprehensive book is "Games for the Playground, Home, School and Gymnasium" (\$1.50, Macmillan, New York). For folk dances, "Dances of the People," by Elizabeth Burchenal (\$1.50, Schirmer, New York), makes a complete guide adequate for a novice dancing teacher. Dances requiring more drill than may seem worth while for one meeting may well be featured at successive meetings to add interest.

Every league master should have a copy of Pamphlet 101 of the National Association, "Sleeping and Sitting in the Open Air." (Single copies sent free; \$2.25 per hundred.) It will interest children immensely to give them a practical demonstration at the meeting of the way to make the Klondike bed. A cot and mattress and blankets should be loaned for the occasion. "The Klondike bed is a method of arranging the bed covers to form a sleeping bag into which a person can slide from the upper end of the bed, the idea being to keep the cold air and wind from getting under the blankets. To make the Klondike bed, place over the mattress an old blanket or a cotton bed pad of the same width as the mattress, and on this, ordi-

nary bed sheets or blanket sheets. Make the bed in the usual way, allowing its covers to fall loose on every side. Then gather up the coverings on one side and pass them beneath the pad to the center of the bed, and follow this by doing the same on the opposite side and at the foot of the bed. The entire bed is last covered by a heavy blanket or quilt which is tucked in under the mattress." (From "Fresh Air and How to Use It," \$1.00, National Association.)

Time to Organize

All workers who contemplate organizing leagues are urged to hold the organization meetings as soon as possible and to recruit the ranks in large numbers in preparation for the community health activities before the Crusade in 1918.

The subject of the April meeting is: "Fly and Mosquito Campaigns. Clean-up Work. Baby Welfare." An attempt will be made to marshal many additional tens of thousands of Crusaders for an attack against flies and other disease carriers, along preventive lines. The February BULLETIN will outline a program for an extra meeting in March.

An Exhibit for the Soldier

The National Association for the Study and Prevention of Tuberculosis is preparing an exhibit on the general subject, "The Health of the Soldier," for use in the military camps in the United States and France. The exhibit will be shown in co-operation with the Educational Bureau of the War Work Council of the Y. M. C. A. in all the Association buildings. At least twenty different sets will be prepared.

The exhibit will be in fifteen panels of three sets of five, and will aim to stress the positive side of health. The first series of five panels will be headed "Diseases are spread by close contact," and will take up coughs and colds, measles, pneumonia, tuberculosis and syphilis. The second set will be headed, "Diseases are prevented by knowledge and care," and will portray how by covering the mouth in coughing and sneezing and by care in spitting, many diseases can be prevented. The third series will be headed, "Fitness for Fighting," and will emphasize the need for fitness and the patriotic aspects of being fit to fight.

James Daugherty, a well-known artist, has been engaged to draw the color illustrations for the panels. These panels will be two-thirds illustration, and will portray as accurately as possible some interesting phases of army life.

In conjunction with the exhibit the National Association will also issue a series of stock lectures on tuberculosis and health, and a special circular for popular distribution in the camps, entitled, "Red Blood."

Annual Meeting Program

The chairman of the Pathological Section for the annual meeting of The National Association for the Study and Prevention of Tuberculosis, whose name could not be announced in the last BULLETIN, is Dr. M. C. Winternitz of New Haven, Conn. The other section chairmen are as follows: Clinical

Section, Dr. Walter R. Steiner, Hartford, Conn.; Sociological Section, James Minnick, Chicago; and Advisory Council, Dr. George Thomas Palmer, Springfield, Ill.

The dates for the meeting are June 6, 7 and 8, and the place is Boston. Members are urged to reserve these dates.

Some Conference Resolutions

Among the significant resolutions adopted by the various sectional conferences, the one adopted by the Southern Conference at Chattanooga outlines a comprehensive program and is worthy of special note. The resolution in full follows:

"WHEREAS, The discussions of the Southern Tuberculosis Conference have clearly indicated that the problem of the control of tuberculosis in the Southern states has been greatly intensified by the war and has been shown to be of vast proportions; and,

"WHEREAS, It has also been shown by the deliberations of the Conference that the machinery available for the prevention and treatment of tuberculosis in the South is utterly inadequate to meet the demands created by the war; therefore, be it

"Resolved, That we, the members of the Southern Tuberculosis Conference individually and collectively pledge ourselves to work in our respective communities for an adequate program for the control of tuberculosis, embodying the following features:

(1) An adequately financed and properly manned State Board of Health with a bureau or division of tuberculosis;

(2) Full time county or district health officers under Civil Service tenure of office;

(3) One hospital or sanatorium bed in public institution for at least every annual death; this to be considered as a minimum provision only;

(4) A tuberculosis dispensary or clinic with a visiting nurse and standards recommended by the National Association in each city of 10,000 population or over, and in every county outside of such city;

(5) A visiting tuberculosis or public health nurse in every city of 5,000 or over, and for the outlying country districts;

(6) A local anti-tuberculosis association in every community able, in the discretion of the State Association, to support a proper program, and an adequately financed and properly manned State Association in each State;

(7) Open Air Schools and Fresh Air Classes in connection with all union or graded schools throughout the South;

(8) A continuous, consistent educational campaign for the schools, the general public, the medical profession and public officials;

(9) Reporting, follow-up and careful supervision in home and institutions of every case of tuberculosis."

The nurses at the round table, held in connection with the North Atlantic Conference, were impressed with a number of problems that arose out of their discussions, and adopted the following resolution, which is also worthy of mention:

"WHEREAS, In this joint conference, at which there were present about 150 people interested in the fight against tuberculosis, many interesting reports were delivered, coming from a number of cities and towns from which delegates were sent, and discussion incident to anti-tuberculosis work as promulgated in these several cities and towns was engendered: it was

"Resolved, That in view of the number of tuberculosis cases constantly coming to the notice of those closest to the situation it becomes essential to the success of the work being carried on along these lines that the number of nurses for field duty be augmented to that commensurate with the urgent requirements of the situation; and it was further

"Resolved, That in addition to the increased number of efficient nurses referred to, it is urgently desired that hospital and sanatorium accommodation be brought to the required status, and that open air classes for school children be made a more conspicuous feature in the general training of children; and it was finally

"Resolved, That in order to prevent the occurrence of tuberculosis sanitary and housing conditions should be improved, and in order that proper diet may be intelligently administered visiting dietitians and teachers of home economics should be appointed and maintained."

Name of Tuberculosis Play Changed

The name of the play entitled "The Destroyer," as announced in the last number of the BULLETIN, has been changed to the title, "Love Forbidden." The first performance will be given at the National Theatre, Washington, D. C., on Sunday, February 3d, and invitations will be extended to President Wilson, his cabinet and other prominent officials. The play will "open" in Baltimore on February 4th, instead of in Newark. Its Baltimore production will be given in co-operation with the Maryland Association for the Prevention and Relief of Tuberculosis.

Robert Edeson, the well-known actor, has been engaged to star in the leading part. This fact is sufficient evidence as to the dramatic qualities of the play. The fact that so well known a firm of managers as the Webers would undertake to produce it is evidence of the commercial value of it as rated by theatrical men.

Anti-tuberculosis associations are urged to co-operate with the play when it comes to their communities. Information concerning it may be secured from I. N. Weber, 47th Street and Broadway, New York.

Diagnostic Standards In Tuberculosis

One of the unique and helpful contributions issued by the Framingham Community Health and Tuberculosis Demonstration is a little pamphlet entitled, "Diagnostic Standards in Tuberculosis." This pamphlet was prepared by a special committee, consisting of the following men:

Dr. Arthur K. Stone, Chairman; Dr. Edwin A. Locke, Dr. Cleveland Floyd, Dr. John B. Hawes, 2nd, Dr. Elliott Washburn, Dr. Vincent Y. Bowditch, Dr. Eugene R. Kelley, Dr. Herbert C. Clapp, Dr. Roger I. Lee and Dr. Richard Smith.

It has been used as the basis for diagnosis of tuberculosis in the health and medical examination surveys being conducted at Framingham under the direction of Dr. Armstrong. It is somewhat more elaborate than the standards adopted by the National Association, and, in some respects, differs from these standards, particularly in reference to the diagnosis of tuberculosis in children. Copies of the pamphlet may be obtained on request from the Framingham Health Center, Framingham, Mass.

National Association Needs 5,000 New Members

(Continued from page 1)

to help in this membership campaign. If each reader would undertake to solicit and obtain one new member, the campaign would be won at once. The annual membership fee is five dollars. Checks should be made payable to William H. Baldwin, Treasurer, and mailed to the Executive Office.

Discovering The Exposed Case

By H. H. SHOULDERS, M. D., Tennessee State Board of Health, Nashville, Tenn.

It is necessary to review briefly the essential facts regarding the tuberculosis problem in order to make clear the purposes of the plan for dealing with certain phases of the problem that is outlined below.

The essential facts which have been the most intimately bearing on the prophylactic phases of the question are as follows: First, the infection which most endangers the future of the individual is contracted in childhood. Second, household exposure is probably the most important source of infection. Third, under existing conditions cases are advanced and dangerous exposure has already occurred before the advanced case is isolated in the comparatively few instances in which the cases are effectively isolated. Fourth, the disease will not progress if the vital resistive forces of the individual are kept up to par. Many other facts might be referred to, but the above are dominant, and must be so viewed in determining upon plans of prevention.

Tuberculosis is an infectious disease certainly, but it differs entirely from practically every other infectious disease in certain essential particulars.

If a person contracts the infection of typhoid fever and passes two weeks time without developing the disease, he considers himself free from danger, in so far as that infection is concerned. The same general principle obtains with reference to other acute infections, but in the case of tuberculosis the infection is contracted, we will say, at the age of ten. It will linger in the tissues and not produce recognizable clinical evidence of the disease, tuberculosis, for probably ten or twenty years, and maybe never. So given a person—a child—under the age of 15, who has been intimately exposed to an advanced case of tuberculosis with an open lesion, we are certainly justified in regarding that child as a "potentially" tuberculous child—far more liable to develop the disease in later years than a child not so exposed.

Too, it will often be the case that a child so exposed will be forced to live in the same surroundings in which the parent case developed. It may also have an hereditary predisposition to the disease if such an influence has much bearing. In the circumstances then, we can certainly say that the children who

(Concluded on page 8, col. 3)

FORM 1

County..... T. Book No..... File No..... Year.....

Name of deceased..... Place of death.....
(county or city)

GROUP NO. 1

A. Did the father or mother of the deceased mentioned above die of tuberculosis?.....
(yes or no)

If so, which?.....
(father, mother or both)

When? Father..... Mother.....
(year of death) (year of death)

B. Did any brothers or sisters die of tuberculosis?..... How many?.....
(yes or no)

When.....
(year of death of each)

C. Did the deceased associate with a case of tuberculosis in his or her lifetime?.....
(yes or no)

If so, when?..... Age of the deceased at the time..... For how long a time?.....
(year) (weeks, months or years)

Was the deceased ever treated for tuberculosis in an institution?.....
(yes or no)

If so, when?..... For how long a time?.....

.....
(Signature of Informant)

.....
(P. O. Address)

FORM 2

County..... T. Book No..... File No.....

Name of deceased.....

Date of death..... 191....

GROUP NO. 2

Give name, age (approximate age if exact age is not known) and address of each person who came in more or less intimate contact (in the same room frequently) with the deceased during illness, by frequent visiting or otherwise. Please take particular care to give the names of children up to age 15.

Indicate the relation in case the person named below is a relative of the deceased. The following abbreviations may be used in the column for the purpose to indicate the relation: (F) for father, (M) for mother, (S) for sister, (B) for brother, (Son), son. (D) for daughter.

NAME	RELATION (F, M, S, B, Son, D)	Age (in years)	P. O. ADDRESS	COUNTY OR CITY

.....
(Signature of Informant)

.....
(P. O. Address)

Anti-Tuberculosis Organization For Small Cities *

By H. W. BALDWIN, Sewickley, Pa.

Where local interest in anti-tuberculosis work has been aroused through an exhibit, a special campaign in an adjacent city, or from some other cause, the assistance of a state or national field agent may be asked to perfect an organization.

In such a case it is well for the agent to give most careful consideration before advising along such lines as are given generally by authorities on organization methods. The reason for this is analogous to that of a physician who knows well that a certain drug is the cure for a particular disease, yet the size of the dose and the method of administering is by no means the same with every patient. The most progress is made by not going too fast and making a misstep, which means coming back and going over the ground. The problem should be most carefully considered from every possible angle, such as the character of the people in the community; their occupation; their financial resources; their familiarity with social problems in general; the causes stimulating them in this particular movement, and all other data obtainable; after this it is time for a decision as to what suggestions to offer. The application of the most carefully prepared rules requires a familiarity with human nature and the use of tact and diplomacy.

Make Haste Slowly

If the city is not progressive in any form of social activities, it should be especially borne in mind that progress is best made by going slowly at the start. In such a case it is not simply a problem of training those interested in the anti-tuberculosis work, but in educating them in giving service, in raising funds and the necessity and importance of continuity of service. If a fundamental education is required, it may be best to start first a simple activity that will lead the community step by step to live, active anti-tuberculosis work.

A good preliminary step in a community of this kind is a summer camp. The summer "fresh air movement" is well known and does not require as much explanation as it does to start a nurse or some other forms of work. One may in a small city meet some such criticism as this: "We do not need fresh air; it is not like New York, Philadelphia, or Chicago, with children raised in tenement districts." A few examples of underfed, anemic children will overcome this. There is not a Sunday school in even a small city where the teachers cannot bring forward a number of children showing the need of a change of environment and good nourishment. There are many advantages in

a camp, to stimulate action and train a community to be interested in health and social activities. The peculiar interest attached to work for children makes it an easy task to raise money for a camp; furnishes an interesting subject for newspaper publicity; interests the teachers in Sunday and public schools, the city poor and health authorities; and thus enables one to form a working committee touching almost every group of people and from this beginning to start the work in a broad, comprehensive and democratic way.

Arousing Community Interest

The work connected with a camp of fifteen to twenty-five children lends itself most conveniently to be separated into subdivisions and allows many different committees to be put to work. All work is important that teaches the workers to keep up their end and faithfully to do what they have undertaken. As a camp only lasts six to eight weeks, many helpers may be secured who would hesitate to volunteer if it meant work for a much longer period. Another, and probably the most important educational feature of a summer camp for anemic children, is the interest aroused in all workers and visitors who see the children gaining in health and strength. This interest should be capitalized by having the people in charge of the children explain any interesting features about them or their home conditions.

The stronger the human appeal can be made, the more real and vital is the interest aroused. To illustrate this is a case that came under the writer's personal observation of a woman who took a somewhat casual interest in social work but was induced to visit a camp. While there she became interested in a boy whose eyesight was much affected. She visited the home, and finding most distressing conditions, volunteered to have an oculist care for the boy at her expense. This resulted in other visits, followed by the discovery of tuberculosis in the homes of some of the camp children, and later she became a most enthusiastic worker on a tuberculosis case committee.

By dwelling at such length on the subject of summer camps the writer does not mean to suggest that it is always the first or best step in arousing the interest of a community, but it has educational features of such importance that it surely calls for careful consideration.

Forming the Organization

In further considering the apathetic city in social activities it is unnecessary to call the attention of a trained worker to the danger of an organization being composed of one clique or group, but it may be in order to offer one or two

suggestions in order to make it democratic. The interest at the start will be limited to a few but yet you want your organization to be built for the future, not to be unwieldy, but capable of taking in all interests as they develop. To accomplish this, it is advisable that your board of directors be composed of three classes, namely: ex-officio, representative, and elected. They are given in the order of their least importance. The first are the public officials, mayor, health officer, school superintendent, etc. The next should include all active churches, boards of trade, hospital boards, lodges or labor organizations etc., one representative from each being appointed. These representatives may not attend meetings or be active, but you have at least invited them and every now and then some matter will come up of interest to some particular one of the organizations. The last group will of course be those elected for their real live interest and will be the active workers. The requirements for a quorum should be a given number of "elected directors" only and not in any way based on the others.

Wide Representation Needed

Another caution in the selection of directors is to bear in mind that your city organization will most likely be a part of your county movement and also coupled up with your state work. On this account look over your city for any local members of the legislature or the governing board of the county. You may not think you want them as individuals, but if they can be appointed from some of the churches or lodges as the representative directors it is apt to be of great help when you least expect it. It is much easier to deal with a state senator or county supervisor who is a member of your board than one who is not. Whether such a man has ever attended a meeting of the board, he has had copies of all your literature, of all reports and his name is probably on your stationery.

In contrast with the above assume the city is one that has many social activities in existence, and where health matters in general have been live issues; you here have many more things to consider. You, of course, should make the general survey as outlined at the beginning of this article, and probably the first and most important question will be: Shall the anti-tuberculosis work be an entirely separate organization or part of an existing one? It would be impossible to answer this until every condition has been considered in each case, but attention can be called to some things which should not be overlooked. In planning the scope of work or outlining a program for several years in advance, be sure and do not overlook

* Prepared as a paper for the Institute for Tuberculosis Workers, 1917.

the growth of other organizations during the same period you are planning for. Be very careful to see that you do not over-organize the city. A city over-organized is far worse than one with too little organization. In the latter case the cause is probably too much volunteer work with lack of guidance, and can be easily remedied by securing one or more trained workers. In the former case there is apt to be friction, which must be overcome before the co-ordinating of forces can be accomplished.

Question of Federation

It is difficult to discuss this question without taking a hypothetical case, but the writer would feel that in cities of 40,000 or under a consolidation of all social activities should be most carefully considered. There are two plans of consolidations to consider, one a general federation with one directing head over different departments, or it may be simply a financing organization to raise funds for a group of entirely separate societies, the co-ordinating of their work and the prevention of overlapping being done by the control and distribution of the funds. Both these will have to be considered.

In the smaller cities, if there are several societies, it is almost impossible to make them all democratic. They will be composed of cliques or they will be divided on religious lines, and thus have a tendency to pull apart in their work. Health and tuberculosis work cannot be done without relief work and if you have a municipal nurse with no funds who is not in accord with the society doing relief work, her work is not efficient. On the other hand a relief society with no nurse cannot get results unless it pays a private nurse to do what the city nurse should do. Relief work should not be done without proper investigation and the keeping of proper records. In most cases a nurse or health worker is not trained in the importance of records and if she is rushed, the records as secondary matter are neglected.

Raising Funds

Another consideration for consolidation in smaller cities is that an active city-wide or democratic organization can do far more good in legislative assistance. This applies not only in the city locally but for county and state legislation. In the matter of raising funds there may be more said in favor of the separate organizations. Four societies appealing to the public at four different times can get more than the four together at one appeal, if the appeals are all done thoroughly. The separate appeals would probably, however, not be done as well as the large one. One other point not to be overlooked in this is that an anti-tuberculosis association doing largely propaganda and educational work is harder to secure funds for than a relief or child welfare society.

The above are just some of the questions to be taken into consideration in starting an anti-tuberculosis organization in a smaller city. This article does not pretend to cover all points necessary to

consider by any means, but is only to suggest some factors that might be overlooked.

New Ideas In Minneapolis

The Minneapolis Tuberculosis Committee has been distributing a series of pamphlets on various health subjects, beginning with No. 1 on "Tuberculosis," to about ten thousand factory workers throughout the city.

The committee has also undertaken, through the motion picture theatres, to furnish a series of slides on tuberculosis and other health subjects, which are run for weekly or bi-weekly intervals and then changed. These slides are used in practically all of the theatres in the city and are seen by thousands of people every week. The cost is a comparatively small matter. Detailed information concerning these slides and the circulars may be obtained from Mr. Paul L. Benjamin, Secretary of the Committee, Chamber of Commerce Building, Minneapolis, Minn.

A NEW BOOK LIST

(Continued from page 2)

THE CAUSE OF TUBERCULOSIS. TOGETHER WITH SOME ACCOUNT OF THE PREVALENCE AND DISTRIBUTION OF THE DISEASE. By Louis Cobbett, M.D., F.R.C.S., University Lecturer in Pathology, Cambridge, Eng. Published by Cambridge University Press, 1917. 708 pp., 12 illustrations. Price, \$6.50, postpaid.

This book is addressed to those who are interested in the preventive movement against tuberculosis. The earlier chapters deal with the magnitude of the tuberculosis problem. He then treats of the infectiousness of tuberculosis, and the question of susceptibility, the portals of entry, and the quantity of bacilli needed to infect. The morphology of the bacillus, tuberculosis in animals, the various types and prevalence of the bacillus, etc., are a few of the other topics discussed. The book brings together from the point of view of the pathologist and in scientific form a mass of valuable material that any worker in the anti-tuberculosis campaign should have at his disposal.

THE BATTLE WITH TUBERCULOSIS AND HOW TO WIN IT. By Dr. MacDougall King, M.B. Published by J. B. Lippincott Co., 1917. 260 pp. Price, \$1.50, postpaid.

In this book, designed for the patient and his family, Dr. King has used the popular war spirit, by using the analogy of the tubercle bacillus as the attacking enemy, and the patient as the defender; he has conveyed a vast amount of information about home and sanatorium care of tuberculosis, in readable form. Doctors will do well to recommend this book to their patients.

DISCOVERING THE EXPOSED CASE

(Continued from page 6)

are intimately exposed to an advanced case of tuberculosis this year are the ones who will most likely furnish the advanced cases of the disease in a few years.

It is the purpose of the plan herein outlined to put anti-tuberculosis agencies in touch with the potentially tuberculous children, with the view to preventing them from developing an advanced process.

The plan as it is to be followed in the office of the Tennessee State Board of Health is as follows: The certificates of tuberculosis deaths are transcribed and placed in separate volumes. A questionnaire is sent to the informant, whose name is given on the death certificate, and to the physician last in attendance on the deceased. The blank to be used is reproduced on page 6 to show the type of information called for. The items of information called for by the questions in Group No. 1 are in the main related to the family history of the deceased. These are investigated and have no bearing on the plan.

The information sought as regards exposures is self-explanatory. A follow-up system will be employed to insure as nearly 100 per cent. of replies as is possible. When the name of exposed persons reach the office they will be forwarded literature designed particularly for those who have been exposed to an advanced case of tuberculosis. A list of these exposed persons can be forwarded to any local anti-tuberculous agency that may see fit to visit such persons, and look into their surroundings and environments, and to administer aid.

The list of exposed (potentially tuberculous) persons could be indexed and checked against the certificates of deaths as the years go by to determine just what is happening to them.

If it is to be admitted that education is of value, and it certainly is; if personal visits are to be regarded as of value, and they certainly are, it must essentially follow that education directed immediately at those known to be in the greatest danger, will be of most value.

The adoption of this plan need not necessarily lead to a cessation of activities directed to the cases already advanced. It simply broadens the scope of our anti-tuberculosis activities so as to include those who will, if neglected, most likely furnish our crop of advanced cases that will demand attention five, ten or fifteen years from now. It seeks to prevent the development of the disease in persons known to be "potentially tuberculous" without curtailing any activities directed to the prevention of the spread of the infection. It will enable anti-tuberculosis agencies to concentrate their activities where they are most needed with the greatest assurance of ultimate good.

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BULLETIN

NOV 2 1918

OF

The National Association for the Study and Prevention of Tuberculosis

Vol. IV

FEBRUARY, 1918

No. 5

Why 5,000 New Members are Needed

THE present membership of the National Association is about 2,500. The Association must increase its revenue and expand its sphere of influence if it is going to accomplish the work that must be done during the coming year, along the following lines:

- 1 The carrying on of its extensive war program of education and follow-up work.
- 2 The supplying of additional field service, for which there is great demand.
- 3 The promoting of needed federal legislation and health programs.
- 4 The standardization of all forms of anti-tuberculosis work.

Membership Campaign Has Auspicious Opening

With state and local associations from the Atlantic to the Pacific coast responding enthusiastically, the campaign of the National Association for 5,000 new members by March 11th had an auspicious start on February 4th. Members had already been enrolled by 22 states on that date.

Letters and telegrams from many states have promised full co-operation. North Carolina and Maine expect to more than double their quota. Washington wires it will probably fill its quota during the first week of the campaign. Louisiana writes that three memberships have already been secured and the entire minimum allotment of 25 can doubtless be secured in New Orleans alone. Illinois is working to double its quota. It is hoped that with the many other enthusiastic responses the National Association will be able to report great progress in the March issue of the BULLETIN and to report complete success in the April issue.

Readers of the BULLETIN are urged to assist local and state associations in securing memberships.

The following will give some of the methods of conducting the campaign:

Lists

It should be noted, first of all, that the appeal for membership in the National Association is a peculiar appeal. It is not an appeal to the general public. The policy of the National Association

in soliciting membership has always been to endeavor so to appeal that the support of local anti-tuberculosis agencies is not weakened. In this endeavor it has been necessary to try to reach men and women who were financially able to support local, state and National work, and also those who would have a sufficient insight or interest in the problems of tuberculosis to lend their support to these various groups.

To each state association secretary has been furnished the nucleus of a list. These lists are furnished to secretaries of state associations on a special solicitor's card with a duplicate slip, the card and the slip both bearing the name and address of the individual to be solicited. The state agent will in turn break up this list in accordance with his various local organizations and will send to each one the names of individuals residing in his territory. Local solicitors should be instructed to call on or write to each of these people and to secure, if possible, their membership in the National Association. If membership is secured, it should be checked on the card in the proper way. If it is not secured, the reason should be indicated, such as, for example, "not interested," "cannot afford," "will join later," etc. The name of the solicitor and other questions on the card should also be answered. The card should then be returned to the state association secretary

from whom it was received by the local association. The card should be returned whether the membership is secured or not. If membership is secured, an application card should be filled out. Supplies of these cards will be furnished in whatever quantities may be needed. With the application card should be forwarded the check or cash from the individual. This amount, with the application card and the solicitor's card, should be forwarded by the local association or other agency directly to the state secretary and by him to the National Association. The state secretary will retain the carbon copy slips and from these slips he will be able to determine what names have been solicited, what cards have been returned, what memberships have been secured and what names have not been secured for membership.

Local Lists

The lists furnished by the National Association are given merely as a nucleus for a more extended set of lists. Each state and local association should fill out blank solicitor's cards for individuals in their communities who might be interested in joining the National Association. So far as possible, no individuals should be solicited unless a solicitor's card is previously made out. This will avoid duplication and confusion and will also greatly facilitate checking up the field. Every

BULLETIN OF
THE
NATIONAL ASSOCIATION FOR
THE STUDY AND PREVENTION
OF TUBERCULOSIS

Published Monthly

In the Interest of Workers Engaged in the
Anti-Tuberculosis Movement by
THE NATIONAL ASSOCIATION FOR THE
STUDY AND PREVENTION OF TUBERCULOSIS
105 EAST 22ND STREET, NEW YORK CITY

Vol. IV February, 1918 No. 5

Entered as Second Class mail matter, October 21, 1914,
at the Postoffice at New York, N. Y., under the
Act of August 24, 1912

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effort should be made to list on these prospect cards any individuals in the community who might possibly become a member of the National Association. An ample supply of cards and slips for duplicate copies will be furnished from the National Association.

Starting at Home

It is presumed that every local and state anti-tuberculosis organization is a member of the National Association, or, if not, that it will immediately become one. This applies not only to associations and committees, but to sanatoria, dispensaries, visiting nurse associations, open air schools, etc. The first place to start in soliciting and in building up a list should be with this group. Institutions and associations may join the National Association through their secretaries, presidents or other responsible officers. The association or institution may pay the bills and receive all the literature and other material furnished to members, the membership being entered on the records of the National Association in the name of

the secretary or president, or some other official who may be designated, as, for example, "John Smith, President of the Smithville Anti-Tuberculosis Committee." Another group that should head the list of local prospects consists of the directors of anti-tuberculosis organizations, superintendents of institutions and individuals who are particularly interested in tuberculosis as their special philanthropy. This group forms an unusually good selected list.

Special Prospects

In some communities there will be men and women who might be interested in contributing larger sums than \$5.00 a year to the work of the National Association. These men and women should be specially waited upon, preferably by a committee, and should be made the basis of special appeal. The executive office of the National Association will gladly furnish more detailed information concerning its work and will supply literature and other data to interest and secure the support of such individuals. Where there is a likelihood of a contribution of some magnitude, such as \$1,000 or more, it may be possible, in some instances, for representatives of the National Association personally to wait upon the individual in question.

Allotments

(1) The list on page 1 of the January BULLETIN gives the present membership by states in the National Association and allotments in the campaign for 5,000 new members made to each state. The state secretaries have been requested, in turn, to break up their allotment in a similar form for their local organizations. The allotments are based roughly upon the population of the United States, varied in different localities in accordance with the amount of anti-tuberculosis work being done and the membership of the National Association in these territories.

(2) *Literature and Service.*—The National Association will be glad to furnish envelope enclosure slips, campaign handbooks, special circulars, sample copies of the *Journal of the Outdoor Life*, *The American Review of Tuberculosis*, the "Transactions" of the Association and other literature.

Method of Campaign

(1) *Personal Appeal.*—The most direct and best method of getting members for the National Association is by personally presenting the claims of the work. Inasmuch as the lists will be small and the individuals to be approached will be men and women of influence in the community, a direct personal appeal from one individual or group of individuals to another will secure more members than any other way.

(2) *Using the Solicitor's Cards.*—Solicitors should be impressed with the responsibility of their task in getting the men or women whom they are to solicit. If they do not get them, they

should be impressed with the necessity of telling the reason why on the solicitor's card. This is important, inasmuch as the executive office of the National Association may wish, at some later date, to write to these men and women and these solicitor's cards may be used as a basis for an appeal.

(3) *Use of Circular Letters.*—As indicated in a previous section, where a personal appeal cannot be made, or where it is desirable to follow up a personal appeal by a letter, a judicious use of the mails may be made. This membership campaign, however, is not a "mail sale" proposition. It is a *personal appeal*.

(4) *Caution.*—Local and state organizations and solicitors are again cautioned that this campaign for membership is not a promiscuous, but a selective solicitation. If it is rightly carried on, the campaign will not in any way interfere with local support, but should greatly strengthen the local interest in the work.

Reporting Results

(1) *To Whom to Report.*—Local solicitors should, in all cases, make their reports to the local organization from whom they receive their solicitor's cards. The local associations, in turn, should make their reports to their state association. The state association will then make report for the entire state to the National Association. These reports should be forwarded at periodic intervals every two or three days, or each week at least. It is advisable not to hold them up.

(2) *Solicitor's Card to be Returned.*—The original solicitor's card should always be forwarded with the application card for membership in the National Association. All names and addresses should also be carefully spelled out, to avoid any errors in entering records.

(3) *Charged Memberships.*—In forwarding the application card and the solicitor's card, the attention of all those who use these records is called to the fact that careful notation should be made as to whether the membership is paid or charged. Some people will wish to join the Association but will prefer to be billed for their membership rather than pay for it in cash at once. This is proper provided the individual is responsible. Proper note, however, should be made on the record to this effect.

(4) *Endorsement.*—Each application card should bear the endorsement of some individual, either a state or local secretary or some member of the National Association. This is imperative in order to keep questionable individuals, associated with industries or organizations that are not desirable, from joining the National Association.

(6) *Remittances.*—State associations in rendering reports may remit either by their own check or may forward the original checks or cash turned in by solicitors with membership cards. Money orders may also be used for forwarding the money. The latter is the preferable form of remittance.

Competition

"Red Roll."—The National Association is publishing weekly during the campaign a "booster sheet," entitled "Red Roll," giving the result of the campaign as reported by states and indicating how states are progressing in relation to their quota. Every state will wish to reach its quota, or to exceed it. The "Red Roll" will list states in the order of percentage of quota attained—that is, the state attaining 100 or more per cent. of its quota will always be toward the top and printed in red.

Value of Membership

Entirely aside from the educational campaign that will result from this membership drive, the securing of the allotment of members assigned to each state will mean a valuable adjunct to the work in these particular communities.

Value of the National Association to Local Organizations.—The object of this campaign for membership is to make the National Association of more service to its state and local organizations. Every dollar received from every community in the United States for membership in the National Association will be returned to that community, potentially or actually, in service rendered from the executive office of the National Association. The National Association does not exist for itself, but for its local organizations. The way in which it can be of most use to these agencies is by giving it adequate support.

A Tuberculosis Worker's Library

The following is a descriptive list of publications that are furnished free on request to new members of The National Association for Study and Prevention of Tuberculosis at the time they join. All of them are valuable in certain particular ways, and together they make a nucleus for a good library on tuberculosis.

Pamphlet 101, "Sleeping and Sitting in the Open Air." A 24-page pamphlet designed for popular distribution to promote interest in outdoor living.

Pamphlet 102, "The Effect of Tuberculosis Institutions on the Value and Desirability of Surrounding Property." 64 pp., 1914, 10c. postpaid to non-members. A convincing array of facts and arguments for those who are locating new tuberculosis institutions.

Pamphlet 104, "Tuberculosis Legislation in the United States." 64 pp., 1915, 20c. postpaid to non-members. A helpful monograph for those who are planning new tuberculosis legislation or for those who need to convert legislators to the passage of proposed laws.

Pamphlet 105, "Working Men's Organizations in Local Anti-Tuberculosis Campaigns." 64 pp., 1916, 20c. postpaid to non-members. A study of various tested methods for organization of

working men for anti-tuberculosis work, with their strong and weak points demonstrated clearly. A helpful pamphlet for all local organizations.

Pamphlet 106, "What You Should Know About Tuberculosis." A standard pamphlet on tuberculosis of 32 pp., prepared by a committee of the National Association and designed for popular distribution to tuberculosis patients and their families.

Pamphlet 107, "Tuberculosis Dispensary Method and Procedure." 120 pp., 1916, 25c. postpaid to non-members. A handbook for physicians, nurses, secretaries of anti-tuberculosis associations and others who are working in or planning tuberculosis clinics and dispensaries.

Pamphlet 108, "Red Cross Seal Percentages." A study for Red Cross Seal agents to show the prevailing experience throughout the country in the matter of percentages charged by state to local agents.

"Tuberculosis Hospital and Sanatorium Construction." By Dr. Thomas Spees Carrington. A handbook for architects, sanatorium superintendents and others who are building tuberculosis hospitals. The only comprehensive work of this character in English. Revised edition, 1914. 182 pp., 123 illustrations. To non-members 62c. postpaid in paper; \$1.15 postpaid in cloth.

"Fresh Air and How to Use It." By Dr. Thomas Spees Carrington. A practical book of suggestions for architects, physicians, tuberculosis patients and workers, and others who wish to know about the most approved methods of outdoor sleeping. 1914, 250 pp., cloth only, profusely illustrated, \$1.00 postpaid to non-members.

A "Tuberculosis Directory." 421 pp., 1916. Cloth, 60c. postpaid to non-members. Contains a list of institutions, associations and other agencies dealing with tuberculosis in the United States and Canada. It also outlines legislation affecting tuberculosis in the United States, including activities of state and local boards of health.

"Transactions." Transactions of the Annual Meetings of the National Association. Annual volumes of from 400 to 600 pp. Members are entitled to the current volume. Price to non-members, paper, 50c. postpaid; cloth, \$1.00 postpaid. Contains reports of the Treasurer, reports of the Executive Office and the numerous papers read at the clinical, sociological and pathological sections, with discussions.

The Journal of the Outdoor Life. A monthly magazine of a non-technical nature. Publishes articles of helpful interest to tuberculosis patients, physicians, secretaries of anti-tuberculosis associations, and others interested in the campaign.

Monthly Bulletin. A bulletin of important things the National Association is doing, and also of technical suggestions on methods and programs of anti-tuberculosis work.

Sectional Conference Plans

Preliminary arrangements for six sectional conferences next fall are now being made. The time and place of each will probably be announced in the March issue of the BULLETIN. At five conferences last year Continuation Committees were elected to act in an advisory capacity regarding plans for the 1918 meetings. These Committees and also the Central Council of the Mississippi Valley Conference are giving consideration to the matter of time and place, as well as suggestions for programs. Anti-tuberculosis workers in each sectional conference district are urged to send suggestions at once to the office of the National Association.

The members of the Continuation Committees and the Central Council are as follows:

New England Conference.—Dr. E. D. Merrill, Foxcroft, Me.; Dr. George Haven Clarke, Concord, N. H.; Dr. Edward J. Rogers, Pittsford, Vt.; Hon. Jonathan Godfrey, New Haven, Conn.; Miss Mary Murray, Providence, R. I., and Dr. Arthur K. Stone, Boston, Mass.

North Atlantic Conference.—Hugo A. Brown, Buffalo, N. Y.; W. L. Kinkad, Paterson, N. J.; Dr. W. G. Turnbull, Cresson, Pa.; Dr. C. Hampson Jones, Baltimore, Md.; Dr. F. H. Edsall, Wilmington, Del.; Walter S. Ufford, Washington, D. C.; Dr. B. L. Taliaferro, Catawba Sanatorium, Va., and Alexander Forman, Morgantown, W. Va.

Southern Conference.—Miss Pauline Lewy, Montgomery, Ala.; Dr. A. C. Shipp, Little Rock, Ark.; Dr. W. H. Cox, Jacksonville, Fla.; James P. Faulkner, Atlanta, Ga.; Mrs. Meyer Benson, Shreveport, La.; Dr. Henry Boswell, Jackson, Miss.; Dr. L. B. McBrayer, Sanatorium, N. C.; Prof. Reed Smith, Columbia, S. C., and W. B. Cleveland, Memphis, Tenn.

Northwestern Conference.—Mrs. Bethesda Beals Buchanan, Seattle, Wash.; A. L. Mills, Portland, Ore.; Henry L. Falk, Boise, Idaho; H. R. Cunningham, Helena, Mont.; Mrs. R. A. Morton, Cheyenne, Wyo., and Frank W. LeClere, Salt Lake City, Utah.

Southwestern Conference.—Mrs. E. L. M. Tate-Thompson, Sacramento, Cal.; Dr. Allen H. Williams, Phoenix, Ariz.; John Tombs, Albuquerque, N. M.; Dr. Z. T. Scott, Austin, Texas; Henry Van Kleeck, Denver, Colo.; E. K. Gaylord, Oklahoma City, Okla.; Dr. Roy W. Martin, Las Vegas, Nev., and Dr. J. L. Everhardy, Leavenworth, Kans.

Mississippi Valley Conference.—James Minnick, Chicago, Ill.; Dr. R. G. Paterson, Columbus, Ohio.; Dr. Robinson Bosworth, St. Paul, Minn.; Dr. H. E. Dearholt, Milwaukee, Wis.; Arthur J. Strawson, Indianapolis, Ind.; A. W. Jones, Jr., St. Louis, Mo.; W. D. Thurber, Chicago, Ill., and Miss Maud Van Syckle, Detroit, Mich.

Modern Health Crusaders' Department



600,000 Crusaders Enlisted

The total number of children qualifying as Modern Health Crusaders in the United States has grown to more than 600,000. While the majority of those who have up to the present time received the certificates of enrollment have qualified through selling Red Cross seals, the distribution of almost 800,000 Crusaders' health chore folders indicates that considerably more children may be expected to qualify through drill in health habits now than during the seal campaign. Prospects are excellent for mustering in one million Crusaders before the summer school vacation. For news of developments, see "Notes and Pointers," below.

"Children's Year"

The Federal Children's Bureau has called on the nation to make our first anniversary in the war the inauguration of a "children's year." The most immediate objective is to save at least one-third of the 300,000 American children below school age who die yearly from preventable diseases. In this program all Modern Health Crusaders have a call to patriotic service. The April meeting for the crusader leagues, as authorized in the manual, will give children of school age their instructions for work to save the lives of their juniors. The subjects are: "Baby Welfare," "Clean-up Work," "Fly and Mosquito Campaigns." The program will be elaborated in the March BULLETIN. The fly campaign, along preventive rather than mere swatting lines, should be conducted by the Crusaders in the Gulf states in March. League masters in these states should secure the reference matter cited in the manual for the April meeting without waiting for our next BULLETIN.

Special Offer in Chore Score Cards

Anti-fly and clean-up work has plenty of tangibility to rally children into community health service. Every effort should be made now to enlist children as Crusaders and form them into leagues as companies in the coming battle. The way to accomplish this is to furnish school teachers, Sunday-school superintendents and other workers with an abundance of health chore score-cards. When they are given out, let the date for returning the cards and organizing the league be definitely named. Even where no league can be assured, the chore score-cards should be given out to children to direct them in health habits. To enroll them in the general Crusade strengthens the cause of public health. Certificate cards with the M. H. C. rules cost but \$2.00 per thousand. When 8,000 or more chore score-cards are purchased on one order, we can

furnish them imprinted with the distributor's address at no additional cost to the regular price, \$2.25 per thousand.

March Meeting

A March meeting can be made very valuable for every league. While no subject is listed in the manual, there are abundant means of making the meeting decidedly interesting and an attraction for new recruits. Announce in advance a four weeks' competition in doing the health chores. Instruct Crusaders to bring their score cards to the March meeting with totals certified in ink by parents. Offer special certificates, ribbons or simple prizes like booklets or newspaper announcements to the several Crusaders with perfect or highest scores.

Besides story-telling, the league master may conduct the drills of the February meeting (see January BULLETIN), remembering to introduce the game element. Thus: instruct the Crusaders to do what you say, not what you do; then tell them to bend backwards while you bend sideways before them; count out those who make mistakes.

Where an M. H. C. pennant and a Daily Health Guide chart have not been previously provided, unfurl and post these at the meeting. The walls of the M. H. C. meeting room should also carry a posture chart, showing the correct standing posture. We will quote prices of these on request.

As a community health activity, which should be discussed at each meeting, the league may pass a resolution and publish it in the paper, calling for medical inspection or an additional nurse or similar improvement.

Notes and Pointers

The Vermont Association for the Prevention of Tuberculosis, as directors of the state legion of the M. H. Crusaders, is publishing "The Modern Health Crusader," a comprehensive four-page monthly bulletin. The National Association and some of the state associations are now using special M. H. C. letterheads for this branch of their work.

The Indiana Association reports the enrollment of 10,000 Crusaders who are using health chore cards in St. Joseph County.

The New York State Charities Aid Association is promoting the Crusade actively throughout the state, outside of New York City. One hundred and twenty-nine teachers in Tompkins County have been supplied with M. H. C. chore cards under the direction of Miss F. L. Brown, public health nurse.

Paul L. Benjamin, Secretary of the Minneapolis Tuberculosis Committee, reports the employment of a special representative for children's work and the development of the Crusade.

The principal of the high school at Victoria, Texas, writes: "We are planning to have the children of our school, about one thousand in number, keep the health chore record."

A West Virginia teacher wrote Dr. Harriet B. Jones, Executive Secretary of the state association: "You ought to see the improvement in my pupils since they have been keeping the chores."

Willis E. Chandler, Executive Secretary of the Rhode Island Association, received the following in a letter from a teacher:

"We are finding the Modern Health Crusader movement very interesting, and I know of some good it is doing in cultivating the habit of keeping clean."

"Yesterday one of my boys came to me and told me he had bought a tooth-brush and so had his brother, and they were going to begin keeping their record of health chores next Sunday. Another brother has already begun his health chores; and for the first time in weeks, it seems to me, I notice his hair has had a good combing."

"Several of the families in my district make it quite the rule for their children to brush their teeth, etc., but even then the children enjoy keeping a record and earning the pin immensely."

Frank W. LeClere, Executive Secretary of the Utah association, reporting the progress of the Crusade in that state, cites an order for 1,000 chore records at Provo, the seat of Brigham Young University.

WILL YOU JOIN?

I desire to become a member of THE NATIONAL ASSOCIATION FOR THE STUDY AND PREVENTION OF TUBERCULOSIS, and enclose herewith five dollars in payment of my annual dues.

Kindly mail Certificate of Membership to

Name _____

Address _____

Checks should be drawn to the order of WILLIAM H. BALDWIN, Treas., and forwarded to 105 East 22nd Street, New York City.

BULLETIN

OF

The National Association for the Study and Prevention of Tuberculosis

Vol. IV

MARCH, 1918

No. 6

Following Up Tuberculous Soldiers

By H. A. PATTISON, M.D., Medical Field Secretary, National Association

The Surgeon General of the Army recognized at the beginning of the war the necessity of eliminating tuberculosis from the Army as completely as possible. He placed at the head of the Department of Internal Medicine Colonel George E. Bushnell, who has been recognized for many years as an authority on tuberculosis, and when called to Washington was the commanding officer of Fort Bayard. Associated with him in dealing with the tuberculosis problem is Lt.-Col. E. H. Bruns, who has been in tuberculosis work for about nine years.

Specialists in tuberculosis and internists of known ability have been commissioned to serve as experts in the camps and cantonments. Under them are the Tuberculosis Reviewing Boards, each composed of from eight to twelve physicians who have had special training in the diagnosis of tuberculosis. Most of these men are commissioned officers of the Medical Reserve Corps.

Each base hospital has a well-equipped X-Ray laboratory with a competent man in charge. Special instruction in the interpretation of plates is being given by commissioned experts at Cornell University.

In a general way the procedure in dealing with tuberculosis at the camps is as follows:

Recruits upon arrival at camp are examined rapidly by regimental surgeons. Cases that present evidence of disease of the chest are referred to the tuberculosis expert, who determines whether the disturbance is tubercular or not. If tubercular, the man is recommended to the Physical Disability Board for immediate discharge.

The Tuberculosis Reviewing Board makes a complete survey of the camp. Certain specified units appear at an appointed hour, and each man is examined by one or more members of the board. Any who are picked out as tuberculous or suspected as such are turned over to the expert, who must finally pass upon each case, and if the diagnosis is positive is reported to the Physical Disability Board.

Doubtful cases are sent to the base hospital for observation. The temperature is taken every two hours and a complete personal and family history obtained. If there is sputum, it is examined every day for three days. Plates

of the chest are developed for stereoscopic examination. The director of the laboratory reports his interpretation in writing. The expert usually examines the plates also. When the diagnosis is determined the expert again recommends rejection or retention, as the case may be. Not every man who is found to have been infected by tubercle bacilli is discharged from the service. The Surgeon General has laid down the rules governing the findings which are necessary before discharge may be granted.

To quote Colonel Bushnell: "If a man presents himself for enlistment who shows slight, old, pulmonary changes, such changes should be viewed as evidence of bygone disease, cured, and, if the soldier is in vigorous health, to be disregarded in the decision as to his acceptance, and disregarded also in the record of his case, so that if it should unfortunately happen that the man in question should break down with active tuberculosis at a later time his disease will be regarded as incurred in line of duty."

Frequent use is made of the terms "contracted in the line of duty" and "not in the line of duty." This distinction is important in that it affects the status of the soldiers as to governmental responsibility for care and compensation by the Bureau of War Risk Insurance. On September 11, 1917, General Gorgas issued the following rules which have up to this time been observed in determining whether pulmonary tuberculosis has been contracted in the line of duty:

"A case of chronic tuberculosis in which the length of service is three months or less shall be considered to be not in the line of duty; cases of acute tuberculosis shall be considered to be in line of duty in all cases irrespective of length of service. When action must be taken in cases in which the distinction between acute and chronic forms is not made, cases of three months' or longer service shall be considered to be in the line of duty; those of less than three months' service shall be considered to be not in line of duty unless it be shown that the patient has had some disease since enlistment, such as measles, which may be expected to reactivate tuberculosis, or unless there is a history of excessive

fatigue or of exposure in line of duty calculated to break down the resistance of the individual."

It will be seen that the government does not hold itself responsible for the care of those drafted men who are found by the examiners to have chronic tuberculosis if the service is less than three months with certain exceptions. They are given either transportation to their homes or a sum of money equal to three and a half cents per mile for the distance from camp to home. A modification of these rules is under consideration.

Concerning compensation of tuberculous soldiers, "the Bureau of War Risk Insurance, while laying down no distinct line of demarcation so far as length of service is concerned, is inclined to pay compensation if it can be shown to the satisfaction of the Bureau that a latent tuberculosis was reactivated by disease, over-strain or exposure, or by other causes due solely to the fact that the discharged man was in active service."

Those for whom the War Department assumes responsibility will be sent to government hospitals. At present five of these are planned—one at Otisville, N. Y., one at Azalea, N. C., one at Merkleton, Pa., one at Whipple Barracks, Prescott, Ariz., and one at Denver, while one is now established at Fort Bayard, N. M. A new 150-bed sanatorium at New Haven, Conn., has been taken over by the War Department.

We are informed at the office of the Surgeon General that it is positively not the policy of the Department to place men in small units in existing local sanatoria. Some of the reasons given for this policy are these:

It is desirable that the treatment shall be standard throughout. This is important for the purpose of compiling statistics of results. The men will be given treatment for so long a time as the individual case may require. Their discipline and control will be much easier in a regular government hospital or sanatorium. There will be less complaint, less restlessness and fewer requests for transfers to other places where the patient fancies he will get better treatment or find a more salubrious climate. The government sanatorium will result in economy of personnel. Small units would have to have one or more officers in charge, and the army

BULLETIN OF
THE
NATIONAL ASSOCIATION FOR
THE STUDY AND PREVENTION
OF TUBERCULOSIS

Published Monthly

In the Interest of Workers Engaged in the
Anti-Tuberculosis Movement by

THE NATIONAL ASSOCIATION FOR THE
STUDY AND PREVENTION OF TUBERCULOSIS
105 EAST 22ND STREET, NEW YORK CITY

Vol. IV March, 1918 No. 6

Entered as Second Class mail matter, October 21, 1914,
at the Postoffice at New York, N. Y., under the
Act of August 24, 1912

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cannot spare these men. If the men are placed in sanatoria close to their homes, it is believed they will develop more concern for family problems, because these problems (and not alone problems but vexations) will be brought to their attention by visiting friends and relatives. It is the desire of the Surgeon General and his aides that they give themselves entirely to the business of getting well. This they are more likely to do when several hundred of them with like memories and like interests are together under full military management.

Those men discharged from the camps because of tuberculosis and "not in line of duty" will number, according to estimates of the Surgeon General's office, about 1 per cent. of the drafted army (i.e., of the first draft). While at Camp Kearney, Cal., 3.95 per cent. were discharged for this cause, in some other camps the number is less than 1 per cent. Many hundreds of these were previously unknown cases. So while the tuberculosis problem is no greater than before the declaration of

war with Germany, our knowledge of it is very much more enlightened, and therefore the sense of responsibility deepened. There is apparent a very keen interest in these unfortunates returned from the camps and a warm desire to perform some service for them. Inquiries reach us from secretaries as to what may be done, and some reports have reached us relating what has been done thus far.

By courtesy of the Surgeon General the names and addresses of those discharged are being furnished to the National Association, which, acting as a clearing house, is forwarding them to the appropriate state boards of health and anti-tuberculosis associations. Since March 1st the division directors of civilian relief have also been receiving lists. This will mean that each man whose name is received is put into touch with three different groups. The necessity for close co-operation between these groups is clearly apparent.

If the men are approached promiscuously and without a full understanding between the three different agencies, there is grave danger that they may be antagonized and that any efforts for their welfare may be frustrated to the detriment both of the individual and of the community. There is, furthermore, the danger that a repetition of such experiences may possibly cause the War Department officials to withhold this valuable information from the public health, the anti-tuberculosis and the Red Cross authorities.

The National Association is urging a plan of co-operation. The first agency that should get in touch with these cases should be the Board or Department of Health, either state or local. These authorities are entrusted with the responsibility for the control of tuberculosis, and theirs is the primary responsibility to the individual and the community. The function of the anti-tuberculosis society, in relation to the cases, should be to see that each individual is properly followed up and that the interests of the men as well as of the community are safeguarded. It should visit and direct the individual case only when assistance is required by the health authorities. The Home Service Sections of the Red Cross, to whom this information will be transmitted by the Division Directors, should be prepared to supplement the efforts of the other organizations when called upon by them to act. Where relief is shown to be necessary, the Red Cross will administer it in accordance with approved standards, as provided by the Director General of Civilian Relief. In other words, the method of approach should be in this sequence:

First, Board of Health; second, Anti-Tuberculosis Society, and third, Red Cross.

In rural communities effective follow-up service presents some difficulties, particularly in those States that have a large area. For the county nurse, where there is one, the rejected soldier presents not only an opportunity for personal service but opens the way for community education and for developing a

new or an increased seal sale. Where there is no nurse a tactfully worded letter may be sent with literature. There is no better pamphlet than No. 106, published by the National Association, entitled "What You Should Know About Tuberculosis." It is being widely used among tuberculous soldiers in Canada.

If it is possible to learn the name of the family physician, a carefully worded letter may be sent to him also.

The new pamphlet just reprinted from *The American Review of Tuberculosis* entitled "Standards for Diagnosis, Classification and Treatment of Tuberculosis in Children and Adults" is an excellent piece of literature to enclose with the letter to the doctor. These letters will naturally have to be adapted to local circumstances and conditions.

In some states the township supervisor is the township health officer. Information could be given to him and obtained from him as to family conditions, attending physician, etc.

In cities, the procedure in New York as outlined by the following memorandum from the Department of Health will prove of value:

"All cases of the above nature referred to branch offices are to be acted upon in the following manner, after the files have been searched for a previous report of case:

"1. Cases already registered in files will be treated in accordance with the classification under which they are registered.

"2. Cases not registered in files will be visited by nurses for purpose of inducing them to come to clinic for diagnosis.

"3. Cases visited by nurse twice, without result, will be assigned to clinic physicians for home visit and diagnosis as 'suspected cases,' to be finally disposed of by them by diagnosis or refusal.

"4. A record is to be kept in all branch offices of all such cases assigned to them, as follows:

"1. Previously reported.

"2. Previously not reported.

(a) Final diagnosis: positive sputum, clinical tuberculosis, negative cases.

(b) Refused examination.

(c) Subsequently reported by physicians, clinic, etc."

Dr. I. J. Murphy, Executive Secretary of the Minnesota Public Health Association, reports as follows regarding the procedure followed in that state:

"We have been following up the cases which you reported to this Association in the following manner: (1) Reporting them to the superintendent of local sanatoria where they have a public health nurse working in the field for the sanatorium. (2) Reporting to the public health nurse where we know they have a county public health nurse. A great number of our counties have these nurses. (3) Reporting to the local health officer where there is no county nurse. (4) Follow-up work by

(Concluded on page 4)

A Record of Achievement

To appreciate fully what the National Association may mean to those organizations that it serves in various parts of the United States, one must familiarize himself, to a certain extent, with the record of work of the Association since its formation in 1904. The following summary gives in brief outline some of the most significant things that the Association has done. This outline deals only, however, with those large outstanding features of national importance and does not comprehend the hundreds of significant achievements accomplished in more or less restricted local fields through direct dealings with individual organizations, either by correspondence or otherwise.

Thirteen Years' Work

(1) Organized and conducted the Sixth International Congress of Tuberculosis at Washington in 1908, a gathering which stimulated the entire anti-tuberculosis movement in America by giving it direction and program.

(2) Started the first traveling tuberculosis exhibit, and continued it for eight years, from 1905 to 1913. It was this exhibit that demonstrated to state and local anti-tuberculosis associations throughout the United States, as well as other social agencies, the value of this method of education, and resulted in the creation of thousands of similar exhibits, large and small.

(3) Published the first national standards of diagnosis and classification of tuberculosis (1906), which have been used continuously in this country and Canada as a basis for reporting upon results of sanatorium and dispensary treatment.

(4) Established the first national health publicity bureau in the United States, which has stimulated similar work in every state and large city of the country and has been the means of educating millions of people and thousands of newspapers and periodicals about the value of public health.

(5) Inaugurated Tuberculosis Sunday, which has since developed into Tuberculosis Week, the means of reaching millions of people annually with a health message.

(6) Promoted the Red Cross Christmas Seal from a limited sale of less than 30,000,000 in 1910 to nearly 200,000,000 in 1917.

(7) Printed and distributed educational leaflets, posters and booklets on tuberculosis aggregating several million copies. These have been the means not only of educating thousands to whom they have been sent, but also of suggesting standards for similar publications to other organizations throughout the country.

(8) Organized a field service by means of which every state in the Union has been visited.

(9) Helped to promote standardization and economy in the construction and administration of tuberculosis hos-

pitals by the publication of special volumes on this subject, by personal advice and field service, thereby saving to communities throughout the country hundreds of thousands of dollars.

(10) Established *The American Review of Tuberculosis*, the only strictly scientific medical journal on tuberculosis published in English in North or South America. In its first year of existence the *Review* has made for itself an enviable place in the scientific publications of the world.

M. H. C. Movement

(11) Organized the Modern Health Crusader Movement, designed to promote personal and community hygiene among the children of school age throughout the country. At the present time more than 500,000 children are enlisted in this crusade.

(12) Established, in co-operation with the New York School of Philanthropy, an institute for the training of tuberculosis workers, the third session of which will be held in 1918. Fifty men and women have already taken this course and are holding responsible positions.

(13) Organized or reorganized state associations in the following states: Maine, New Hampshire, Vermont, New Jersey, West Virginia, North Carolina, South Carolina, Florida, Mississippi, Tennessee, Kentucky, Ohio, Indiana, Illinois, Iowa, Missouri, Arkansas, South Dakota, Oklahoma, Texas, New Mexico, Wyoming, Montana, Idaho, Utah, Arizona, Oregon and Nevada. Helpful assistance has also been given in many local organizations.

Important Publications

(14) Published numerous research studies and important volumes on various phases of tuberculosis work, including the thirteen volumes of the "Transactions" of annual meetings, a most important library on tuberculosis; three editions of a "Tuberculosis Directory" in 1908, 1911 and 1916, "Fresh Air and How to Use It," "Tuberculosis Hospital and Sanatorium Construction," and pamphlets on "The Influence of Tuberculosis Sanatoria on Surrounding Property," "Tuberculosis Legislation in the United States," "Workingmen's Organization in the Anti-Tuberculosis Campaign," "Tuberculosis Dispensary Method and Procedure," "Red Cross Seal Percentages," "Sleeping and Sitting in the Open Air," and "What You Should Know About Tuberculosis," the last-named being a standard tuberculosis pamphlet, prepared by a special committee of the National Association.

(15) By insisting upon the importance of tuberculosis as a war problem, the National Association has been able to put into effect, with the co-operation of the Federal Government, the Young Men's Christian Association and other agencies, a war program which has for its purpose the following up of every

case of tuberculosis discharged from military camps and a complete system of education in all of the large army camps and cantonments in the United States and France, including a special exhibit, motion pictures, lectures and the extensive distribution of literature.

Annual Meetings

(16) Conducted thirteen annual meetings at which the most important clinical, pathological and sociological phases of tuberculosis have been discussed. In 1915 a series of sectional conferences, now numbering six, was organized for the discussion of peculiar district problems. These various meetings were attended by over 2,000 people in 1917.

(17) Investigated the status of a large number of questionable agencies that have traded upon the tuberculosis campaign for various reasons, including the National White Cross League, the Children's National Tuberculosis Society, the McKinley Memorial League, etc., etc.

(18) Promoted legislation on tuberculosis in practically every state, with the result that laws dealing with this disease have received favorable consideration from legislatures throughout the country.

(19) Established the Framingham Community Health and Tuberculosis Demonstration. This demonstration aims to show how, with an adequate program, any community in the United States may effectively control tuberculosis as well as other preventable diseases. The experiment has been under way since August, 1916. The funds for the demonstration are provided by the Metropolitan Life Insurance Company.

(20) Published for several years past a monthly BULLETIN, giving suggestions with regard to methods and programs of anti-tuberculosis work.

(21) Co-operated with the American Medical Association and other agencies in studying and publishing information relative to fraudulent "cures" for tuberculosis, including the exposé of the so-called "Friedman cure."

Summary

(22) Promoted and stimulated the organized movement against tuberculosis in every possible way, in co-operation with affiliated agencies, with the result that there are at the present time in this country 600 tuberculosis hospitals and sanatoria with a bed capacity of over 43,000; fourteen hundred anti-tuberculosis associations and committees, including a state association in every state and most of the outlying territories of the United States; nearly 500 special tuberculosis dispensaries and clinics; more than 1,000 open air schools; and approximately 3,000 special tuberculosis nurses, as contrasted with the conditions in 1905, when the Association was started, at which time there were in this country only 115 tuberculosis sanatoria with a bed capacity of less than 9,000; only 25 anti-tuberculosis associations; less than 20 tuberculosis dispensaries; no open air schools; and no tuberculosis nurses.

Modern Health Crusaders' Department



"Kill the winter flies! Now is the time to begin next summer's campaign." This is the heading of a display card published by the Merchants' Association of New York. We will send it free to Crusader leagues in preparation for the April meeting. "One fly killed in April is equivalent to killing thousands in August"; so begins a pamphlet, "Fighting the Fly in Cleveland." Apply to the Bureau of Fly Prevention, Division of Health, Cleveland, Ohio, or to the National Association for a copy of this account of how Cleveland made itself a practically fly-less city.

In this year of militant health work, Crusaders may readily be interested in a strategic war on flies and mosquitoes as agents of the enemy, the carriers of typhoid and dysentery, of tuberculosis and other diseases. "The Transmission of Disease by Flies," a pamphlet of the U. S. Public Health Service, will give facts enabling the league master to interest Crusaders immensely. Write to Washington for Supplement No. 29 to the Public Health Reports.

The next meeting should be made the send-off for the campaign against the fly. Health officials or health workers in town should be lined up by the league master for cleaning out fly-breeding places. Prizes for an early catch will prove helpful.

Spring Cleaning

Crusaders can play a useful part in a clean-town movement. The annual Clean Town Contest conducted by the Utah State Board of Health should be duplicated in many states. Apply to the Secretary, Dr. T. B. Beatty, Salt Lake City, for descriptive literature. Crusader leagues may help their communities materially by laying the literature of the National "Clean-up and Paint-up" Campaign Bureau in the hands of the town commercial clubs. Address Kinloch Building, St. Louis.

Children's Year

"Baby Week Campaigns," a booklet of the Children's Bureau of the Department of Labor, may similarly be secured. Child welfare is one of the standard subjects for the April meeting. At this meeting the league may embark on a plan of co-operation with the woman's club of the town in conducting a baby week campaign or a child welfare exhibit. Write to Julia C. Lathrop, Chief of the Children's Bureau, Department of Labor, Washington, for the booklet, "Baby Week Campaigns," and for material to help the community do its part in saving 100,000 little children in this "Children's Year." The National Child Welfare Exhibit, 70 Fifth Avenue,

New York, will supply bulletins on application describing its beautiful parcel post exhibit on "Healthy Babies and Healthy Children" and explaining its use.

Notes and Pointers

It is impossible to cite all the reports of the progress of the Crusade now being received. Its progress is a geometrical progression. We invite reports and suggestions from all quarters and as far as possible will publish all news of improvement in method and program.

The Community Health and Tuberculosis Demonstration is promoting the Crusade in a thoroughgoing campaign among the Framingham, Mass., schools. The members of the junior class in biology of the high school, after qualifying as Crusaders by doing the health chores, were assigned as league masters in the elementary school grades, from the fourth grade up. This Crusader work is a part of the regular class work of the high school. Furthermore, 300 high school freshmen have been put to doing the chores. In each of the lower classes a herald or clerk is elected to collect the chore score cards once a week. A competition in compositions on the Crusade is being conducted with cash prizes in each grade from the fourth to the eighth.

J. P. Kranz, Executive Secretary of the Tennessee Anti-Tuberculosis Association, reports that "through the assistance of the Parent-Teacher Association, it has been definitely arranged that the Modern Health Crusader leagues shall be formed in every school in Nashville."

Miss Eric Chambers, Acting Secretary of the Arkansas association, writes: "The public schools are co-operating thoroughly. Our medical inspector has been tremendously interested in this organization and is anxious to see it pressed here."

School auxiliaries of the Red Cross in various states under the Junior Membership plan are promoting the Crusade as supplying a personal and community health program. Miss Edna Ford Guyer, visiting nurse of the Red Cross Chapter of Fairfield, Conn., writes:

that a school principal there insisted that every child in her school take the chore score cards and work in competition with a neighboring school to secure new members.

Miss Ethel L. Steeves, Red Cross public health nurse in Vermont, reports that the Crusader system of chores has wrought wonderful results in the ten schools under her charge in Hartford Township.

Motion pictures have been taken in Washington, showing the drills and activities of some of the leagues in that State. With these films, the State Legion is able to promote the development of the Crusade, which has been very rapid through the State.

Following up Tuberculous Soldiers

(Continued from page 2)

our nurses where the health officer or other agency does not promise to follow up the case.

"We, of course, endeavor to have every case reported sent to an institution if at all possible. There is ample room in Minnesota to accommodate all such cases."

Even before they reach home rejected tuberculous soldiers are often advised by those holding the old delusions concerning the value of climate, to "Go West." Sometimes they do not go home at all, but taking the money due them from the government make for a southwestern state. Unless this tendency is strongly combated everywhere there is likely to develop a serious problem with the dependent migratory consumptive.

The National Association has completed negotiations with the War Department whereby, through the office of the Surgeon General, the records of all men rejected on account of tuberculosis by exemption boards in the draft, both first and second, and in all future drafts, will be transmitted to this office, and through this office to the same agencies now receiving the names of those rejected in camps.

Frequent reports from the field to the National Association will be greatly appreciated. Methods employed and experiences resulting will be of value to others in the work.

WILL YOU JOIN?

I desire to become a member of THE NATIONAL ASSOCIATION FOR THE STUDY AND PREVENTION OF TUBERCULOSIS, and enclose herewith five dollars in payment of my annual dues.

Kindly mail Certificate of Membership to

Name

Address

Checks should be drawn to the order of WILLIAM H. BALDWIN, Treas., and forwarded to 105 East 22nd Street, New York City.

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BULLETIN

OF

The National Association for the Study and Prevention of Tuberculosis

Vol. IV

APRIL, 1918

No. 7

New Name—New Address

The National Tuberculosis Association is to be the newly incorporated successor of The National Association for the Study and Prevention of Tuberculosis. Beginning May 1st, the new address of the Association will be

NATIONAL TUBERCULOSIS ASSOCIATION

381 Fourth Avenue, New York City

Fourteenth Annual Meeting of the National
Tuberculosis Association, Boston, Mass.,
June 6th, 7th and 8th, 1918

Preliminary Program

(Subject to change)

General Order of Sessions

Thursday, June 6th

2:30 P. M.

Registration opens at headquarters, Copley-Plaza Hotel.

3 P. M.

Meeting Executive Committee.

3:45 P. M.

Meeting Board of Directors.

4:30 P. M.

GENERAL MEETING

Address of the President.....Charles L. Minor, M.D.

Report of the Executive Office.....Charles J. Hatfield, M.D.

Preliminary business of the Association.

6 P. M.

Dinner meeting, American Sanatorium Association, place to be announced. Subject: Standards of Administration for Tuberculosis Hospital. Speaker: H. A. Pattison, M.D., Medical Field Secretary, National Tuberculosis Association. For further information write E. S. McSweeney, M.D., 25 West 45th Street, New York City.

8:15 P. M.

Meeting of the Advisory Council.

Friday, June 7th

9 A. M.

Meeting of Clinical Section.

Meeting of Sociological Section.

12:30 P. M.

Luncheon for Public Health Nurses.

(For details write Miss Bernice W. Billings, State House, Boston)

2 P. M.

Meeting of Pathological Section.

Meeting of Sociological Section.

(Continued on Page 2)

Information About the Annual Meeting

MEETINGS.—All meetings, unless otherwise announced in the final program, will be held at the Copley-Plaza Hotel.

HOTELS.—All those attending the meeting are expected to make their own hotel arrangements. Owing to the crowded conditions of hotels at the present time, arrangements should be made well in advance. The following hotels are recommended by the local committee on arrangements as being convenient of access to the headquarters:

Copley-Plaza Hotel, Dartmouth Street, Trinity Place and Copley Square (Headquarters Hotel).—Single rooms with bath, \$3.50 to \$6.00; double rooms with bath, \$5 to \$10.

Hotel Brunswick, Boylston and Clarendon Streets.—Single rooms with bath, \$2.50 to \$4; double rooms with bath, \$3.50 to \$6; single rooms without bath, \$1.50 and \$2; double rooms without bath \$2.50 and \$3.

Copley Square Hotel, Massachusetts and Huntington Avenues.—Single rooms without bath, \$1.50 to \$3; double rooms without bath, \$2.50 to \$4; single rooms with bath, \$2 to \$3; double rooms with bath, \$3 to \$5.

Hotel Lenox, Massachusetts Avenue near Copley Square.—Single rooms, \$2.50 to \$4; double rooms, \$3 to \$6.

Hotel Oxford, Huntington Avenue and Copley Square.—Single rooms without bath, \$1.50; with bath, \$2 to \$2.50; double rooms without bath, \$2 to \$2.50; with bath, \$3 to \$5.

(Concluded on Page 2, Col. 1)

BULLETIN OF
THE
NATIONAL ASSOCIATION FOR
THE STUDY AND PREVENTION
OF TUBERCULOSIS

Published Monthly

In the Interest of Workers Engaged in the
Anti-Tuberculosis Movement by
THE NATIONAL ASSOCIATION FOR THE
STUDY AND PREVENTION OF TUBERCULOSIS
105 EAST 22ND STREET, NEW YORK CITY

Vol. IV April, 1918 No. 7

Entered as Second Class mail matter, October 21, 1914,
at the Postoffice at New York, N. Y., under the
Act of August 24, 1912

OFFICERS OF THE ASSOCIATION

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FREDERICK L. HOFFMAN, Ph.D., Newark, N. J.

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105 East 22nd Street, New York City

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CHARLES M. DEFEST, - *Field Secretary*
FREDERICK D. HOPKINS, - *Field Secretary*
DR. H. A. PATTISON, *Medical Field Secretary*

Hotel Westminster, Copley Square.

—Single rooms without bath, \$2; with bath, \$3.50; double rooms without bath, \$3 to \$3.50; with bath, \$5.

Hotel Victoria, Copley Square.—Single rooms with bath, \$3; double rooms with bath, \$5.

Hotel Touraine, Tremont and Boylston Streets.—Single room without bath, \$3; with bath, \$3.50 to \$6.50; double room without bath, \$1.50; with bath, \$5 to \$8.50.

Hotel Bellevue, Beacon Street.—\$2 per day and upward.

RAILROADS.—No reduced special railroad fares can be secured this year. The Trans-Continental Passenger Association announced that they will have a year-round special round-trip fare from Pacific Coast States to certain Atlantic Coast points. These tickets will be good for nine months and will approximate two cents per mile in each direction, or about one fare and one-third for the round trip.

Preliminary Program

(Continued from Page 1)

4:30 P. M.

GENERAL MEETING

Reports of Committees.
Election of Directors.

5 P. M.

Meeting Board of Directors.
Round table on Modern Health Crusader Methods.

8 P. M.

Mass meeting under auspices of Local Committee of Arrangements.

Saturday, June 8th

9 A. M.

Meeting Clinical Section.
Meeting Sociological Section.

12:30 P. M.

Meeting and outing National Conference of Tuberculosis Secretaries.

Advisory Council

George Thomas Palmer, M.D., Springfield, Ill., Chairman.

Thursday, June 6th

8:15 P. M.

How France is meeting the tuberculosis war problem, James Alexander Miller, M.D., New York City.

How the United States is meeting the tuberculosis war problem, Frank Billings, M.D., Chicago.

How Canada is meeting the tuberculosis war problem, Capt. Jabez H. Elliott, Member Canadian Military Hospital Commission, Toronto, Can.

Clinical Section

Walter R. Steiner, M.D., Hartford, Conn., Chairman.

J. E. Murphy, M.D., Hartford, Conn., Secretary.

The following individuals have agreed to present papers in the Clinical Section. Three sessions for the Clinical Section will be provided if necessary.

The fresh air treatment and its results in tuberculosis, Vincent Y. Bowditch, M.D., Boston, Mass.

Title not yet given, Fred H. Heise, M.D., Saranac Lake, N. Y.

One or possibly two papers. Title not yet given, Allen K. Krause, M.D., Baltimore, Md.

The treatment of tuberculous laryngitis by reflected sunlight, Charles W. Mills, M.D., and A. M. Forster, M.D., Colorado Springs, Colo.

Thirty-five hundred cases of tuberculosis which have been treated at the Modern Woodmen Sanatorium for Tuberculosis, J. A. Rutledge, M.D., Woodmen, Colo.

An X-Ray study of the lungs in cases of syphilis with tuberculosis, Cleaveland Floyd, M.D., Boston, Mass.

Rest and exercise in the treatment of pulmonary tuberculosis, Hugh M. Kinghorn, M.D., Saranac Lake, N. Y.

Title not yet given, Charles L. Minor, M.D., Asheville, N. C.

Title not yet given, Lawrason Brown, M.D., Saranac Lake, N. Y.

Title not yet given, Joseph H. Pratt, M.D., Camp Devens, Ayer, Mass.

Tuberculosis of the larynx, J. Dworetzky, M.D., Otisville, N. Y.

Pains in the chest, with special reference to pulmonary tuberculosis, John B. Hawes, M.D., Boston, Mass.

Report of thirteen cases of tuberculosis complicated by diabetes treated by the Allen starvation method, H. R. M. Landis, M.D., Philadelphia, Pa.

Study of the subsequent history of cases discharged from Arequipa Sanatorium as apparently cured during a period of six years, Philip King Brown, M.D., San Francisco, Cal.

Title not yet given, Alfred Meyer, M.D., New York, N. Y.

The necessity for caring for the careless consumptive, John J. Lloyd, M.D., Rochester, N. Y.

Artificial pneumothorax and pregnancy, S. A. Slater, Oil City, Pa.

Non-tuberculous pulmonary conditions as a cause of invaliding, J. H. Elliott, M.D., Toronto, Can.

Pathological Section

M. C. Winternitz, M.D., New Haven, Conn., Chairman.

Dr. George H. Smith, New Haven, Secretary.

The program of the Pathological Section has not yet been completed. An interesting series of papers, however, will be read by Lydia M. DeWitt, M.D., Chicago; E. R. Baldwin, M.D., Saranac Lake; S. A. Petroff, Saranac Lake; Paul A. Lewis, M.D., Philadelphia; Allen K. Krause, M.D., Baltimore; and A. H. Clark, M.D., Baltimore.

Probably one session will be taken by the Pathological Section.

Sociological Section

James Minnick, Chicago, Ill., Chairman.

Ernest D. Easton, Newark, N. J., Secretary.

Friday, June 7th

9 A. M.

The problems in the vocational re-education of disabled men, C. A. Prosser, M.D., Washington, D. C.

Reconstruction and rehabilitation work for the tuberculous in the army, Harry E. Mock, M.D., Washington, D. C.

Friday, June 7th

2 P. M.

Farm work for tuberculous patients at Eudowood Sanatorium, Martin F. Sloan, M.D., Towson, Md.

Training of the sanatorium patient in an industrial colony, Bayard T. Crane, M.D., Rutland, Mass.

Eighteen years' experience in ergotherapy and its economic and therapeutic results, Philip King Brown, M.D., San Francisco, Cal.

The utilization of patient labor at the tuberculosis sanatorium at Otisville, Hermann M. Biggs, M.D., New York, N. Y.

Occupation and industrial training of tuberculous cases in sanatoria, J. Roddick Byers, M.D., Ste Agathe Des Monts, P. Q.

Saturday, June 8th

9 A. M.

Three years' experience in the employment of the discharged tuberculous patients in factory work, Edward Hochhauser, New York, N. Y.

Employment of post-tuberculous patients. Experience of International Ladies' Garment Workers' Union, George M. Price, M.D., New York, N. Y.

Experimental workshop. Experience of Pottery Workers' Union, H. R. M. Landis, M.D., Philadelphia, Pa.

IF YOU ARE GOING, SEND THIS BLANK

National Tuberculosis Association

105 East 22nd St., New York City
(381 Fourth Avenue, after May 1)

I am planning to attend the 14th Annual
Meeting in Boston, June 6-8, 1918.

Name

Address

Representing

Action of National Association Board

At a meeting of the Board of Directors of the National Association, held on March 16th, action was taken on a number of different points that will be of interest to members of the Association.

A special committee was appointed which has since acted upon an experimental arrangement with the National Social Workers' Exchange, whereby all the employment service and placement work of the National Association will be turned over to the Exchange, which is operated under the direction of Mrs. Edith Shatto King. Inquiries concerning positions and concerning persons to fill them are, however, to be continued to be addressed to the office of the National Association.

It was decided to incorporate the National Association and to change the name from its present one to "National Tuberculosis Association."

A committee on federal legislation was appointed to look after the interests of the National Association and to co-operate with the Surgeon General and other war agencies at Washington in furthering desirable legislation.

A committee of five clinicians was appointed, with power to speak for the National Association, to co-operate with the military and naval authorities in plans for governmental care of soldiers and sailors suffering with tuberculosis.

The following minute in reference to the late Herbert Maxon King was adopted as prepared by Dr. Lawrason Brown:

"In the death of Herbert Maxon King, a member of The National Association for the Study and Prevention of Tuberculosis since its inception, and for a number of years a member of its Board of Directors, this Association feels that the anti-tuberculosis campaign has lost a worker it can ill afford to spare: his sanatorium colleagues, a guide and stimulus difficult to replace; and scientific work in tuberculosis, an advocate and a supporter of great strength."

The budget of the National Association as presented, amounting to \$83,000 of expenditures, was approved. In approving the budget an arrangement for removing the offices of the National Association from its present quarters to 381 Fourth Avenue was made. This will be the address of the National Tuberculosis Association after May 1st.

Modern Health Crusaders' Department



Advance Notice

The Junior Red Cross has joined in promoting the Modern Health Crusade.

Dr. H. N. MacCracken, National Director of Junior Membership of the American Red Cross, has endorsed the Modern Health Crusade as a system which the Junior Red Cross wishes to see introduced in the schools to teach personal hygiene and to enlist children in public health work. Plans for carrying out a thorough-going co-operation between the Junior Red Cross and the national and state tuberculosis associations will be announced in the May BULLETIN. In the meanwhile, Crusader literature with letters explaining the plan of co-operation will be placed in the hands of managers of the fourteen divisions of the Red Cross.

Contest Winners

The Modern Health Crusader leagues in the following localities have won the banners for enrolling the largest numbers of Crusaders in ratio to the respective populations. The competitors of each victor were the other leagues in all towns and municipalities of the country in the same population class. The classes are defined by the population figures here listed:

Population Class	Winner	Population	No. of Crusaders	Ratio
300-600 inhabitants	Omak, Wash.	475	130	.273
600-1,200 inhabitants	Bothell, Wash.	598	79	.132
1,200-2,000 inhabitants	Independent School Dist. No. 4 (Sugar City and Salem), Idaho	1,125	200	.177
2,000-8,000 inhabitants	San Anselmo, Cal.	2,505	200	.079
8,000-25,000 inhabitants	Donora, Pa.	11,976	1,788	.149
50,000-150,000 inhabitants	St. Joseph County, Ind.	102,875	9,537	.092
400,000-1,000,000 inhabitants	Buffalo, N. Y.	467,197	1,458	.003

It is planned to present the banners to the winning league masters or officers of the state Legions of Modern Health Crusaders attending the annual meeting of the National Association in Boston, June 6th to 8th. In the absence of a representative to receive any one of the banners, it will be sent directly to the league master.

The executive staff of the National Association is highly pleased at the interest displayed in this first national Modern Health Crusaders' competition. The competition, it is expected, will be an annual event.

The leagues that are awake to their opportunity will want to have a live meeting between the April and the June meetings set by the manual. A good subject for a May meeting is "Fake

Cures and Real Medicine." There is abundant material, free for asking, with which a meeting with this subject can be made an entertainment both for Crusaders and all other children, parents and visitors. More than one of the playlets described in the free circular of the National Association, "The Play's the Thing," are to the point. In "Miss Fresh Air," the leading lady and Dr. Sunshine stand for real medicine. Ten cents in postage sent to the National Association will bring a copy of this playlet for each of the eight children characters.

For patent medicine exposés, write to the National Association for a copy of Dr. Philip P. Jacob's "Fake Consumption Cures," published by the Metropolitan Life Insurance Company. Apply to the Division of Child Hygiene of the New York City Department of Health for its leaflets on Pe-ru-na, Swamp-Root and other dopes for dupes.

Book Marks for Crusaders

The picture-card book-marks published by the National Association are snappy little teachers on fake cures as well as on hygiene. The best way to distribute them is to give out one of a set of seven to each Crusader after each week in which he has done eighty per cent. of his health chores. Boys and girls will be proud to have earned the whole set. The cost is seventy-five cents per hundred sets or twenty-five cents per twenty-five sets, postpaid. A sample set is three cents. There are eight cards to a set, but the eighth must be imprinted with the death rate from tuberculosis in the state or sub-division. The book-

marks may be obtained, imprinted with the death rate and with the name of the league or the state legion, for \$10 for a minimum of 1,000 sets.

For League Rooms

Beside pennants and daily health guide charts, we recommend that the charts of the American Posture League and the set of food charts of the Association for Improving the Condition of the Poor (New York City) be provided as strikingly instructive for both children and adults. Prices quoted on application.

Notes and Pointers

Miss Irma Collmer, secretary of the Anti-Tuberculosis League of South Bend, Indiana, writes of the work in

St. Joseph County, where a pennant was won: "We are hearing glowing reports on Modern Health Crusader work every day, and I know the sale of tooth brushes has increased fifty per cent. in St. Joseph County. One teacher in a rural community says it has affected the entire population, and that parents are every bit as enthusiastic as the children and often borrow the Crusader pins from them. Public health work is also beginning to attract the attention of the children, and it looks as if, before the school year is over, we will be able to accomplish several important changes in the conditions here."

Interesting reports are at hand, showing the useful service of the crusade in the mill schools of South Carolina and in negro schools in Georgia.

The superintendent of schools at Keene, N. H., says of the Crusade that it teaches "real things" and that it is vastly more important to train children in health habits than to teach them anatomy and physiology.

Red Cross Seal Workers' Conference

A well-attended conference of Red Cross Seal workers, including some from as far west as Texas and South Dakota, was held on February 28th, to discuss plans and policies for the 1918 Christmas Seal sale.

A number of changes in the contract were discussed, the principal one being with reference to the elimination of rebates and the allowing of a flat ten per cent. charge hereafter. The definition of anti-tuberculosis work was also somewhat strengthened by shifting the order of the paragraphs and placing the emphasis on educational work.

The question of co-operation of the American Red Cross in the seal sale was definitely fixed, the Red Cross pledging itself to do its utmost to make the campaign a success. Every assurance was given to those present that, so far as the officers of the Red Cross was concerned, the seal campaign was a vital and intrinsic part of their work and they were willing to do everything in their power to help it. It was suggested, however, that in order not to conflict with the membership campaign of the American Red Cross to be held next Christmas season, the seal campaign be shortened somewhat, so that the definite campaigning be stopped on December 15th, and it was decided to fix this date accordingly. As to the beginning of the campaign, this was left somewhat open, either for November 1st or November 15th.

A number of interesting designs for the Red Cross Seal were discussed, the consensus of opinion being that this year the emphasis should be on some sort of patriotic design. Those present favored a design bearing a head of the Goddess of Liberty with the flaming torch, symbolizing healing and justice.

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BULLETIN

OF THE

National Tuberculosis Association

NOV 2 1918

Vol. IV

MAY, 1918

No. 8

Illinois Plan for Tuberculous Soldiers

The question of adequate machinery to provide care for returned tuberculous soldiers and the methods of procedure is now commanding attention. The plan given below will, therefore, be of interest as an illustration of a practical working agreement between a State Department of Health, a State Tuberculosis Association and the American Red Cross.

This will be suggestive for agreements which may be made in other states. In printing this agreement, the National Association wishes to have it clearly understood that the plan is not presented as ideal or one necessarily adapted to other states. The agreement has been formally ratified by the Department of Civilian Relief, American Red Cross, Washington.

This agreement will be the topic for discussion at a luncheon for anti-tuberculosis workers, Hotel Muehlebach, Kansas City, on May 20th, in connection with the National Conference of Social Work. Dr. George Thomas Palmer, Assistant Director of the State Department of Public Health and President of the Illinois Tuberculosis Association, will talk on the agreement and it will be discussed by representatives of the American Red Cross and others. A further statement in regard to this matter will be made in the June BULLETIN.

The agreement follows:

Memorandum of agreement between the Central Division of the American Red Cross and the Illinois State Department of Public Health and the Illinois Tuberculosis Association.

As a preface to this agreement, it is understood that the Central Division of the American Red Cross, the Illinois State Department of Public Health, and the Illinois Tuberculosis Association shall co-operate in securing adequate care and treatment for the returned tuberculous soldier, whether he may have been discharged in "line of duty" or "not in line of duty."

It is further understood that the Central Division of the American Red Cross, through the Home Service Sec-

tions of its local chapters, shall provide care for returned tuberculous soldiers during the interim between their return to their home communities and the time that more permanent provision is made for them, and shall contribute one-third of the expense for the more permanent care.

It is further understood that the Illinois Tuberculosis Association, after the initial contact with the returned tuberculous soldier by the Central Division of the American Red Cross, shall cause an expert examination and diagnosis to be made in the case of each returned tuberculous soldier; shall outline the proper method of care and treatment to be pursued and shall make every pos-

sible effort, in conjunction with the local chapter of the American Red Cross, to provide means for the more permanent care of such returned soldiers. It is understood in this connection that relief problems involved in the care of the families are to be worked out by the Home Service Section as may seem best in a given community.

of the return of a tuberculous soldier, the Central Division of the American Red Cross, through its Home Service Section of the local chapter, shall make contact with such soldier and ascertain essential facts concerning him, including the following facts desired by the Illinois Tuberculosis Association:

(a) Exact location of the individual, including his nearest railway station. (b) The apparent physical condition of the individual, whether in apparent normal health, debilitated or actually sick. (c) The financial condition of the individual, or his ability to meet all or part of the cost of care, approximating from \$18 to \$25 per week. (d) The educational standards of the individual and his family, rated as excellent, good, fair or poor. (e) The home conditions of the individual, rated as excellent, good, fair or poor. (f) The name of the family physician, and his willingness to co-operate in this program, indicated by "yes," "no," or "doubtful." (g) The desire of the individual and his family for expert diagnosis and treatment, indicated as "willing," "uninterested," "opposed."

2. That the Illinois Tuberculosis Association shall make no effort to establish contact with returned tuberculous soldiers until after such contact is made by the local chapters of the American Red Cross, and until the foregoing information is furnished through the offices of the American Red Cross, *except* that, in case no notice and information be furnished to the Illinois Tuberculosis Association through the offices of the Central Division of the American Red Cross within two weeks after the said Association has notified the Central Division of the return of a tuberculous soldier, said Association may establish contact, at the same time notifying the Central Division of the American Red Cross of its intention to do so.

3. That the Illinois Tuberculosis Association shall furnish to the Central Division of the American Red Cross at once a complete record of all returned tuberculous soldiers with whom contact has been made or whose return has been reported to the Association, including all information relative to such soldiers now in the possession of the Association.

4. That, upon notice from the Central Division of the American Red Cross, the Illinois Tuberculosis Association will proceed to bring about, in the short-

STOP

Have you made your hotel and railroad reservations for the fourteenth annual meeting of the National Tuberculosis Association? Put the time and place on your memorandum pad—Boston, June 6th to 8th.

LOOK

Did you see the April BULLETIN, giving the preliminary program? Copy on request.

LISTEN

You will hear good speakers at the Boston meeting. Papers and talks by national authorities at clinical, pathological and sociological sessions.

**Headquarters and meetings
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able effort, in conjunction with the local chapter of the American Red Cross, to provide means for the more permanent care of such returned soldiers. It is understood in this connection that relief problems involved in the care of the families are to be worked out by the Home Service Section as may seem best in a given community.

In carrying out this program, the following points will be observed by all parties hereto:

1. That, immediately upon notification

BULLETIN OF THE NATIONAL TUBERCULOSIS ASSOCIATION

Published Monthly

In the Interest of Workers Engaged in the
Anti-Tuberculosis Movement by the
NATIONAL TUBERCULOSIS
ASSOCIATION

381 FOURTH AVENUE NEW YORK CITY

Vol. IV May, 1918 No. 8

Entered as Second Class mail matter, October 21, 1914,
at the Postoffice at New York, N. Y., under the
Act of August 24, 1912

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est time practicable, the examination and diagnosis of all returned tuberculous soldiers, and the outlining of proper methods of treatment, and will report such diagnosis and outlines of treatment to the Central Division of the American Red Cross.

5. That the Illinois Tuberculosis Association, for the purpose of these examinations, shall enlist the services of experts in the diagnosis of tuberculosis, and the services of competent nurses as required, and that the examinations will be held either at the home of the returned soldier or the central points convenient to the various returned soldiers.

6. It is understood that, in order to avoid delay, the expenses of transportation to these central examining points shall be advanced by the Home Service Section of the Local Red Cross chapters, provided the individual is unable to pay for same. This shall be considered as one item in the expense of treatment, as in paragraph 10.

7. It is further understood that when special examiners for the Illinois Tuberculosis Association or other representative enter a community to carry out the purposes of this agreement, they will act in co-operation with the Home

Service Section and the local health officer, so that the Home Service Section will be in touch with the service rendered to the returned soldier at all times, and so that the local health officer may conserve the interests of the civil population.

8. That the results of all examinations shall be reported to the State Department of Public Health so far as they may affect the control and prevention of communicable diseases.

9. That, in the interim between the return of the tuberculous soldier and his examination, and the outlining of his more permanent care, Home Service Sections of the American Red Cross shall render the returned soldier such care as he may require, with the understanding that examinations will be carried out as expeditiously as circumstances will permit.

10. That under no circumstances will the American Red Cross countenance the housing of a returned tuberculous soldier in a county almshouse, either temporarily or permanently, except when absolutely unavoidable.

11. That the American Red Cross shall pay one-third of the expense of sanatorium or other care, as outlined or recommended by the Illinois Tuberculosis Association, *provided* the remaining two-thirds can be secured from other individuals or agencies, public agencies for the treatment of tuberculosis not being available. Provided, further, that if the whole plan of treatment be not carried out, the Home Service Section is expected to pay only its one-third of the amount of expense involved in partial execution of the treatment.

12. That, after the diagnosis is made and is reported to the Central Division of the American Red Cross, together with the recommended treatment, the Illinois Tuberculosis Association, together with all of its local organizations, shall exert all possible influence upon local individuals and public and private organizations to assume two-thirds of the cost of permanent care of the returned tuberculous soldier.

13. That the American Red Cross, through its local chapters, shall co-operate with and assist the Illinois Tuberculosis Association in obtaining permanent care of the returned tuberculous soldier, as outlined in Section 12 of this agreement.

14. That the records of the Illinois Tuberculosis Association and the records of the American Red Cross, so far as they apply to the returned tuberculous soldiers of Illinois, shall at all times be open to representatives of any party to this agreement for the purpose of carrying out the provisions of this agreement.

15. That the Illinois Tuberculosis Association will require of institutions, physicians, or other agencies to whom the care of tuberculous soldiers is entrusted, complete reports of progress, and abstracts of copies of these reports will be sent at frequent intervals to the office of the Central Division of the American Red Cross.

16. Nothing in this agreement shall be construed to affect the jurisdiction

of the State Department of Public Health or local health authorities in cases of tuberculosis which fall within the rules and regulations for the control and suppression of tuberculosis.

Addendum, signed by Charles C. Stillman, Assistant Director of Civilian Relief, Central Division, American Red Cross.

It is understood that paragraph 11 is to be interpreted in the spirit of the agreement reached at the Chicago Conference on March 29, 1918. That is to say, this paper does not bind the National organization of the Red Cross, or its Division Office, to any payment from either treasury for the purpose indicated. It does mean, however, that the Division Office, through its Civilian Relief Bureau, shall use every possible influence to cause the Home Service Sections of local Chapters to provide funds as indicated. The Division Office shall present to the various chapters in the division that the care of discharged tuberculous soldiers, in accordance with the plan outlined here, is an obligation as well as an opportunity resting upon them because of their assumption of Home Service Work.

Two New Secretaries for National Association

On May 1st two new secretaries joined the staff of the National Association, John Daniels and Leet B. Myers. Mr. Daniels will serve as Publicity Secretary and Mr. Myers as Field Secretary. Both of these men have had long experience and training in social work.

Mr. Daniels is a graduate of Harvard University and holds a master's degree from that institution. He has had experience in social settlement work in South End House, Boston, and elsewhere. He was director of the Buffalo social survey in 1909, and later secretary of the New York and New Jersey League for Immigrants. In this capacity and in other ways he has contributed much to the movement for the Americanization of immigrants. Along similar lines Mr. Daniels has also been of signal service in the movement for the advancement of negro education. From 1913 to 1916 he served as director of the Social Service Corporation at Baltimore. In 1916 he was called to be director of the newly organized Children's Home Bureau of the New York City Department of Charities, in which capacity he served until early in the present year. Mr. Daniels has had extensive experience in the preparation of publicity and educational material, and brings with him a broad understanding of the problems of public health and social work. He is the author of a book on the study of Boston negroes, entitled "In Freedom's Birthplace," and also a text-book entitled "An Outline of Economics," as well as of numerous reports and pamphlets.

Mr. Myers is a graduate of Ohio Wesleyan University and of the New

(Concluded on page 8)

Revised Program for Annual Meeting

Boston, June 6-8

Since the preliminary program of the Fourteenth Annual Meeting of the National Tuberculosis Association was printed in the April BULLETIN several changes and additions have been made.

The dinner meeting of the American Sanatorium Association, announced for Thursday, will be omitted. A short business session will be held at 5 p. m., Friday, June 7th.

The program of the Advisory Council meeting on Thursday evening will be as follows: "How America Is Helping France With Its Tuberculosis Problem," James Alexander Miller, M.D., New York; "How the United States Is Meeting the Tuberculosis War Problem," Col. George E. Bushnell, U. S. A.; "How Canada Is Meeting the Tuberculosis War Problem," Capt. Jabez H. Elliott, Canadian Military Hospital Commission, Toronto, Canada.

In accordance with Article X of the By-Laws of the National Association for the Study and Prevention of Tuberculosis, all of the various agencies engaged in anti-tuberculosis work throughout the country are invited to attend the annual meeting of the National Association and to participate especially in the meeting of the Advisory Council to be held on the evening of June 6th. There is no fee for membership in the Advisory Council, and organizations may send one or more representatives to represent them at this and other meetings of the National Association.

The program of the Clinical Session will be divided as follows:

Friday morning session: Drs. Rutledge, Philip King Brown, Lloyd, Floyd, Sampson, Hawes and Elliott. Friday afternoon session: Drs. Krause, Bowditch, Kinghorn, Lawrason Brown, Pratt and Landis. Saturday morning session: Drs. Slater, Dworetzky, Mills and D. MacDougall King. The subject of the paper by Dr. Joseph H. Pratt will be "Tuberculosis as an Army Problem," and Dr. Lawrason Brown will collaborate in this paper. Dr. Bowditch has changed the title of his paper to "Methuselah and Life in the Open." The title of Dr. J. Dworetzky's paper has also been changed to "The Institutional Care of Laryngo-Pulmonary Tuberculosis." The title of the paper by Dr. H. R. M. Landis has been changed to "Diabetes Complicated with Tuberculosis, Treated by Means of the Allen Method," and Dr. Elmer H. Funk and Charles M. Montgomery of Philadelphia will collaborate in the paper. The paper by Dr. King is additional to those mentioned in the April BULLETIN. His subject will be the "Recording of Physical Findings in Chest Examinations."

Dr. James B. Murphy, Rockefeller Institute for Medical Research, New York, has been added to the list of speakers at the meeting of the Pathological Section on Friday.

Miss Mary S. Gardner, R.N., Director of the Town and Country Nursing Service of the American Red Cross and Superintendent of the Providence District Nursing Association, will preside at the luncheon meeting for public health nurses on Friday. Miss Bernice Billings, R.N., of the Massachusetts State Board of Health, will discuss "Some Tuberculosis Problems of the Rural Public Health Nurse," and Miss Margaret Stack, R.N., Visiting Nurse Association, New Haven, will speak on "Some Tuberculosis Problems of the City Public Health Nurse," after which there will be an open discussion. All nurses interested in this subject are invited to attend. The luncheon will be held at Westminster Hotel, price \$1.00 per plate.

In place of the meeting and outing of the National Conference of Tuberculosis Secretaries, scheduled to begin at 12:30 P.M. on Saturday, the Secretaries and all others interested will hold a dinner meeting at 6:30 P.M. on Friday at the Westminster Hotel. Stunts will be provided by Eastern, Western and Southern groups.

The mass meeting, under the auspices of the local committee on arrangements, will begin at 8:15 on Friday evening, instead of at 8:00 o'clock.

The program will be as follows: Address by Hon. Samuel W. McCall, Governor of Massachusetts. "The Work in Tuberculosis of the Department of Health," Eugene R. Kelley, M.D., Commissioner of Health; "The State Sanatoria," Arthur K. Stone, M.D., Chairman of the Trustees of Hospitals for Consumptives; "The Municipal Hospitals of Massachusetts," John F. O'Brien, M.D., Chairman of the Trustees, Boston Consumptives' Hospital; "Tuberculosis Work in the State at Large," Vincent Y. Bowditch, M.D., President Massachusetts Anti-Tuberculosis League.

The session of the Sociological Section, scheduled for 9:00 A.M. on Saturday, will close at 11:00 o'clock, and a special session on the Framingham Community Demonstration will be added. Three papers will be given at this session, as follows: "The Framingham Health Program; The First Year's Results," Donald B. Armstrong, M.D., Executive Officer; "The Framingham Consultation and Medical Examination Work," P. C. Bartlett, M.D., Chief Medical Examiner; "The Framingham Educational and Organization Activities," Miss Mary A. Abel, Educational Assistant.

In the information regarding hotels in the April BULLETIN the Copley Square Hotel and the Hotel Lenox were listed by mistake as on Massachusetts Avenue. They are both on Exeter Street. Dr. Arthur K. Stone, Chairman of the Local Committee on Arrangements, also wishes to call attention to the Cat-

lin and Clapp Pension, 124 Newbury Street, which he recommends as desirable headquarters for women who expect to attend the meeting.

Delegates arriving over the Boston and Albany Railroad or the New York, New Haven and Hartford Railroad will find it convenient to use the Back Bay stations, which are only one block from the Copley-Plaza Hotel.

"Love Forbidden"

"Love Forbidden," the play from the French which has tuberculosis for its theme, after being produced at Baltimore and Philadelphia, was taken off in order to have changes made to conform more closely to the author's manuscript.

An entire new company of players has been cast for the parts, headed by Garland Gaden, who played the physician in "Damaged Goods" throughout the country.

The route of the new company, beginning April 15th, was Pittston, Pa.; Shenandoah, Reading, Allentown, South Bethlehem, Easton, Scranton, Sunbury, Shamokin, Harrisburg.

The play was at the Montauk Theatre, Brooklyn, for the week of May 13th.

Information concerning future routes, etc., may be secured from Sidney R. Ellis, Times Building, New York, who is making this production by arrangement with Garland Gaden, who holds the American rights.

Sectional Conference Dates and Places

While it is not possible to announce definitely the dates and places of all of the Sectional Conferences, tentative dates can be given and members of the National Association and others who are interested may be able to plan accordingly.

The conferences will probably meet as follows: Northwestern, Spokane, Wash., September 27th and 28th; Southwestern, Denver, Colo., October 4th and 5th; Southern, Birmingham, Ala., October 11th and 12th; North Atlantic, Pittsburgh, Pa., October 18th and 19th; New England, Providence, R. I., - October 25th and 26th; Mississippi Valley, Columbus, Ohio, during the week of September 30th.

In giving the members of the Continuation Committees of the various conferences in the last number of the BULLETIN, a mistake was made with reference to the Central Council of the Mississippi Valley Conference, the names included being those for 1917. The names of the members of the Council for 1918 are as follows: Dr. Alfred Henry, Prest., Indianapolis, Ind.; Dr. W. J. Marcle, Vice-Prest., Minneapolis, Minn.; James Minnick, Temporary Sec'y-Treas., Chicago, Ill.; Miss M. K. Coady, Louisville, Ky.; Dr. E. A. Gray, Chicago, Ill.; Mrs. Ethel M. Hendriksen, Grand Rapids, Mich.; S. C. Kingsley, Cleveland, Ohio; Dr. John H. Peek, Des Moines, Iowa.

State Association Directory

Since the publication of the Tuberculosis Directory in 1916, many changes have occurred in the names of state anti-tuberculosis associations and in the personnel of the executive secretaries.

As anti-tuberculosis workers may have occasion to use this list, a revised directory of the state associations is given below:

Alabama Anti-Tuberculosis League, 311½ S. 20th st., Birmingham, Ala.; Rev. George Eaves, D.D., secretary.

Arizona Anti-Tuberculosis Association, 300 E. Adams st., Phoenix, Ariz.; Miss Carol F. Walton, executive secretary.

Arkansas Public Health Association, 401 Donaghey building, Little Rock, Ark.; Miss Erle Chambers, acting executive secretary.

The California Association for the Study and Prevention of Tuberculosis, 514 Chamber of Commerce building, Los Angeles, Cal.; Mrs. E. L. M. Tate-Thompson, executive secretary.

The Rocky Mountain Public Health Association, 821 Majestic building, Denver, Colo.; S. Poulterer Morris, executive secretary.

Connecticut State Tuberculosis Commission, State Capitol, Hartford, Conn.; George I. Allen, secretary.

Delaware Anti-Tuberculosis Society, 1404 Franklin st., Wilmington, Del.; Miss Emily P. Bissell, president.

Association for the Prevention of Tuberculosis of the District of Columbia, 923 H st., Washington, D. C.; Walter S. Ufford, secretary.

The Florida Anti-Tuberculosis Association, 510 Dyal-Upchurch building, Jacksonville, Fla.; Homer W. Borst, executive secretary.

Raoul Foundation Crusade Against Tuberculosis in Georgia, 1415 Empire building, Atlanta, Ga.; J. P. Faulkner, executive secretary.

The Idaho Association for the Study and Prevention of Tuberculosis, 620 Fort st., Boise, Idaho; Mrs. Catherine R. Athey, executive secretary.

Illinois Tuberculosis Association, 8 S. Dearborn St., Chicago, Ill.; Walter D. Thurber, executive secretary.

Indiana Society for the Prevention of Tuberculosis, 117 E. Market st., Indianapolis, Ind.; Arthur J. Strawson, executive secretary (on leave of absence); Miss Ethel Roberts, acting secretary.

Iowa Tuberculosis Association, 518 Century building, Des Moines, Iowa; Ralph J. Reed, executive secretary.

Kansas Association for the Study and Prevention of Tuberculosis, Topeka, Kan.; Dr. J. J. Sippy, secretary.

The Kentucky State Health and Welfare League, Old State Capitol, Frankfort, Ky.; Dr. W. L. Heizer, executive secretary.

Louisiana Anti-Tuberculosis League, 1309 Tulane ave., New Orleans, La.; Dr. G. Farrar Patton, secretary.

Maine Anti-Tuberculosis Association, 27 State st., Bangor, Me.; A. J. Torsleff, secretary.

Maryland Association for the Prevention and Relief of Tuberculosis, 311 W. Monument st., Baltimore, Md.; James Jenkins, Jr., executive secretary.

Massachusetts Anti-Tuberculosis League, 3 Joy st., Boston, Mass.; Seymour H. Stone, secretary (on leave of absence); Miss Ethel M. Spofford, acting secretary.

Michigan Anti-Tuberculosis Association, 435 Science building, Ann Arbor, Mich.; W. L. Cosper, executive secretary.

The Minnesota Public Health Association, Old Capitol, St. Paul, Minn.; Dr. I. J. Murphy, executive secretary.

Mississippi Anti-Tuberculosis Campaign Committee, 109 N. State st., Jackson, Miss.; Mrs. Robert S. Phifer, Jr., secretary.

The Missouri Association for the Relief and Control of Tuberculosis, 800 Broadway, Columbia, Mo.; Dr. W. McN. Miller, secretary.

Montana Association for the Prevention of Tuberculosis, State Capitol, Helena, Mont.; Mrs. Sara E. Morse, executive secretary.

The Nebraska Association for the Study and Prevention of Tuberculosis, 483 Brandeis Theatre building, Omaha, Neb.; Mrs. K. R. J. Edholm, executive secretary.

Nevada Public Health Association, 835 N. Center st., Reno, Nev.; Mrs. John M. Fulton, secretary.

The New Hampshire Association for the Prevention of Tuberculosis, City Mission building, Manchester, N. H.; Dr. Robert Kerr, executive secretary.

New Jersey Anti-Tuberculosis League, 45 Clinton st., Newark, N. J.; Ernest D. Easton, secretary.

The New Mexico Public Health Association, Commerce building, Albuquerque, N. M.; John Tombs, executive secretary, P. O. Box 457.

Committee on the Prevention of Tuberculosis of the New York State Charities Aid Association, 105 E. 22d st., New York City; George J. Nelbach, executive secretary.

State Red Cross Seal Commission of North Carolina, Sanatorium, N. C.; Dr. L. B. McBrayer, executive secretary.

The North Dakota Anti-Tuberculosis Association, Bismarck, N. D.; Dr. Fannie Dunn Quain, secretary.

The Ohio Society for the Prevention of Tuberculosis, 83 S. 4th st., Columbus, Ohio; Dr. Robert G. Patterson, secretary.

The Oklahoma Association for the Prevention of Tuberculosis, 315 Oklahoman building, Oklahoma City, Okla.; Jules Schevitz, general secretary.

Oregon Association for the Prevention of Tuberculosis, 503 Corbett building, Portland, Ore.; Mrs. Saidie Orr-Dunbar, executive secretary.

Pennsylvania Society for the Prevention of Tuberculosis, Pennsylvania building, 15th and Chestnut sts., Philadelphia, Pa.; R. B. Spicer, executive secretary.

Rhode Island Anti-Tuberculosis Association, 109 Washington st., Providence, R. I.; Willis E. Chandler, secretary.

South Carolina Anti-Tuberculosis Association, 512 Palmetto building, Columbia, S. C.; Dr. L. A. Riser, executive secretary.

Red Cross Seal Commission of South Dakota, Armour, S. D.; Mrs. E. P. Wanzer, chairman.

Tennessee Anti-Tuberculosis Association, Peabody College, Nashville, Tenn.; James P. Kranz, executive secretary.

Texas Public Health Association, 616 Littlefield building, Austin, Tex.; D. E. Breed, executive secretary.

Utah Public Health Association, 120 E. First South St., Salt Lake City, Utah; Frank W. Le Clere, secretary.

The Vermont Association for the Prevention of Tuberculosis, 181 Church st., Burlington, Vt.; Harold W. Slocum, executive secretary.

The Virginia Anti-Tuberculosis Association, 1110 Capitol st., Richmond, Va.; Miss Agnes D. Randolph, secretary.

The Washington Association for the Prevention and Relief of Tuberculosis, 916 Cobb building, Seattle, Wash.; Mrs. Bethesda B. Buchanan, executive secretary.

West Virginia Anti-Tuberculosis League, Glendale, W. Va.; Dr. Harriet B. Jones, secretary.

The Wisconsin Anti-Tuberculosis Association, 471 Van Buren st., Milwaukee, Wis.; Dr. Hoyt E. Dearholt, executive secretary.

The Wyoming Public Health Association, 319 W. 26th st., Cheyenne, Wyo.; Mrs. R. A. Morton, secretary.

175 Million Seals Sold in 1917

Winners of Pennants in Red Cross Seal Competition—600 Million 1918 Seals

One hundred and seventy-five million seals is the grand total for the 1917 sale of Red Cross Christmas seals. While some state agents have been prevented from sending in their final reports by the tardiness of local agents in rendering their reports, it is probable that the revision of the total figure called for by the later reports will be upward rather than downward. The National Association extends its hearty congratulations and sincere thanks to everyone in the army of Red Cross seal agents who contributed to the tremendous success of the campaign.

66 Per Cent. Increase

As large as was the increase over the 1916 sale, amounting to 66 per cent, the American Red Cross and the National Tuberculosis Association look for a far larger increase in the 1918 sale. The factors which contributed most to the success of the 1917 campaign—aroused patriotism, quickened generosity and enlarged appreciation of the menace of disease to the nation, as well as the high zeal of Red Cross seal salesmen—will, we are confident, work more mightily this fall than last.

In this faith, the national organizations are now having 600 million seals printed, as against 400 million a year ago. Even more seals will be provided if the demand is indicated before it is too late to secure additional paper and printing. This year of supreme opportunity it behooves every agent to make his preparations far earlier than ever before. The congestion of transportation and other adverse conditions predicated on the war prescribe the earliest possible preparations.

The design of the 1918 seal will be printed in the June BULLETIN. It will scarcely be necessary to give an interpretation of the design. Its message will be apparent as the combined appeal of Liberty, Humanity and the Spirit of Christmas.

Unprecedented Scores in Pennant Competition

The winners in the 1917 interstate competition are as follows:

Class A—Populations up to 1,250,000
1. Wyoming 7.24 per capita
2. Arizona 4.10 per capita
Class B—Populations from 1,250,000 to 2,400,000

1. Minnesota 3.63 per capita
2. Connecticut 3.44 per capita
Class C—Populations Over 2,400,000

1. Wisconsin 3.24 per capita
2. New York 3.23 per capita

Wyoming and Minnesota were likewise winners in 1916. This year's per capita sale in Wyoming is two and one-

half times the score in 1916, which was then the record in the interstate competition. In the 1916 competition no state had a per capita as high as 3; in the last competition no state winner has a per capita as low as 3.

Inter-City Contest Winners

The winners in the inter-city and -town competition follow:

Population Class	Per Capita
1. 300-600.....	Broadview, Mont. 84.76
2. 600-1,200.....	Big Timber, Mont. 31.51
3. 1,200-2,000.....	Kellogg, Idaho 35.60
4. 2,000-8,000.....	Dillon, Mont. 27.64
5. 8,000-25,000.....	Phoenix, Ariz. 19.31
6. 25,000-50,000.....	Tulsa, Okla. 10.39
7. 50,000-150,000.....	Oklahoma City, Okla. 8.52
8. 150,000-400,000.....	Minneapolis, Minn. 6.10
9. 400,000-1,000,000.....	Buffalo, N. Y. 5.67
10. Over 1,000,000.....	Brooklyn, N. Y. 3.26*

The holders of second and third places are:

Population Class	Per Capita
1. 300-600.....	2. White Sulphur, Mont. 81.19 3. Milton, Ill. 42.42
2. 600-1,200.....	2. Lambert, Minn. 30.15 3. Prague, Okla. 27.00
3. 1,200-2,000.....	2. Harlowton, Mont. 22.08 3. Hailey, Idaho 21.09
4. 2,000-8,000.....	2. Mayville, Wis. 21.03 3. Worthington, Minn. 20.70
5. 8,000-25,000.....	2. Bartlesville, Okla. 15.05 3. Ithaca, N. Y. 14.14
6. 25,000-50,000.....	2. Charleston, W. Va. 9.75 3. Decatur, Ill. 9.20
7. 50,000-150,000.....	2. Fort Wayne, Ind. 8.44 3. Springfield, Ill. 8.20
8. 150,000-400,000.....	2. Louisville, Ky. 5.66 3. Rochester, N. Y. 5.39
9. 400,000-1,000,000.....	2. Milwaukee, Wis. 4.46 3. Pittsburgh, Pa. 3.86
10. Over 1,000,000.....	2. Chicago, Ill. 2.16 3. New York, N. Y. 1.97

With the exception of Class 2, all of the winners and holders of second place in the above list made scores higher than the largest per capita sales ever shown before in their classes.

Banners to be Presented

The banners won both in the national Red Cross seal competition and in the Modern Health Crusader competition will be presented to representatives of the winning associations and Modern Health Crusader leagues at the annual meeting of the National Association, to be held in Boston, June 6 to 8. If a representative of any winning organization is not in attendance, the banner will be forwarded by express.

* Chicago was given as winner in earlier announcements, Brooklyn having failed to report by the close of the competition. Chicago has now magnanimously waived her right to first place, and goes into second position.

Raising Money for Charitable Work

A Study of the Federation or "Cleveland" Plan

A very timely report has recently been issued by the American Association for Organizing Charity, whose office is at 130 East 22d Street, New York City, in regard to the federation plan for financing a city's charitable organizations. Under this plan, which is sometimes called the "Cleveland plan," a man is not solicited separately for contributions by each of the city's charitable organizations. If he gives to the federation he becomes immune from such solicitation—in so far as the organizations have united with the federation.

Federations have been formed in twenty cities, including Baltimore, Cincinnati, Cleveland, Denver, and Milwaukee. In six cities they have been abandoned. Jewish federations exist in a number of other cities, but they have not been included in this study.

The report is a comprehensive one, covering nearly 300 pages. It was prepared by a special committee, consisting of the secretaries of the Charity Organization Society of New York City, of the United Charities of Chicago, and of the Associated Charities of Boston and a member of the board of managers of the Associated Charities of Washington, D. C. The committee had the assistance of Fred S. Hall, of the staff of the Russell Sage Foundation.

Financial success is reported to have been "usual in initial federation years, except where there has been inadequate preparation and organization," but such success is "much less surely shown when later years are taken into account." Failure is indicated, the report asserts, in the one city where there has been a long experience. The committee contends, however, that the gains achieved have been based almost uniformly upon methods of financial work which "do not tend to build up as stable a constituency as most organizations in non-federation cities now have."

The recommendation the committee submits, after considering both advantages and disadvantages, is "very positively against any adoption of the plan at present."

"Fourteen cities," the committee adds, "are now experimenting with the plan under quite varying conditions and with several different types of organization. We feel strongly that this is experimentation enough. Whether the federation plan in any city means a social advance or the reverse is yet to be demonstrated. Those who are wise will allow that demonstration to be worked out by the cities that have already adopted the plan."

Making An Exhibit

The following suggestions for exhibitors were prepared by Mr. E. G. Routzahn, of the Department of Surveys and Exhibits of the Russell Sage Foundation, primarily for use in conjunction with exhibits of the United States Food Administration. They have a great deal of practical value for anti-tuberculosis workers who are interested in preparing exhibits. Mr. Routzahn's suggestions follow:

What is an exhibit?

In using the term "exhibit" a distinction between two types should be made.

First, there are exhibits that aim to present facts and ideas in quick, striking and readily understood form.

Second, there are exhibits that call for close examination and possibly a familiarity with technical terms and methods. This type includes diagrams, statistical charts, heavily worded placards, specimens in jars with typewritten labels, blue prints, documents, etc.

The suggestions below have to do only with the first and more popular type.

Some advance tests of a successful exhibit.

Will it attract the attention of passing visitors and cause them to stop?

Will it hold their interest until they have grasped the essential facts contained in it?

Will people talk about it afterwards?

If advice is given is it so presented as to lead people to act on it?

The exhibitor, in assembling his graphic material, should continually be asking himself such questions and be trying to measure up to such tests.

Kinds of exhibit material for food exhibits:

- Displays of food and utensils;
- Posters or panels;
- Labels;
- Pictures, as cartoons, photographs and sketches;
- Models;
- Mechanical or moving devices;
- Automatic stereopticons.

Panels.

If a group of charts, posters or exhibit panels are used they should have very few words on them, preferably not more than 25 on each.

If only one or two panels are used in a booth, visitors may be expected to look at a maximum of 60 to 75 words of interesting reading matter in large letters, attractively displayed.

Use labels for objects.

With every object or group of objects a label is needed to show:

What it is;

Why it is displayed.

Every object has a particular significance as an exhibit or it would not be displayed. If you leave it to the visitors to guess what the significance is, they are just as likely to guess wrong as right. They should be told *exactly*.

The right kind of label.

Don't use typewritten or handwritten labels. The letters are too small. Use at least half inch letters—gummed or hand lettered by someone who can make neat, legible letters. Use cards large enough to allow for wide margins.

The right place for labels.

Where will you put the labels? This may seem a very small matter, but the contrary is true; it is so important in "getting your idea over" that you cannot afford to do it wrongly.

Don't let your label conceal any exhibit or any part of one.

Don't let your exhibit conceal any part of your label.

Place the label so that anyone can readily tell to which object it belongs.

Quantity.

It is vastly more important to make interesting and clear all that you do exhibit than it is to have a large display. Leave out some things that *seem* to be important, so that the *most important* exhibits won't be so crowded.

One thing that "gets over" is much more valuable than two or three or four things that get only half way over.

Selection.

By all means do *not* put in something that has nothing to do with the subject just because it looks well, or because somebody asked to have it shown, or because it may be important in itself.

Even though everybody ought to be persuaded to kill the flies, there is no place for a "Swat the Fly" poster in an exhibit on balanced diet, for example.

Arrangement.

Have a starting point and a given direction to follow. Put up a sign "Begin here" and have someone say the words also. Use numbers or arrows to guide people in the right direction.

Place every exhibit as nearly as possible within range of the sight of standing persons, and use ropes or railings to keep people from coming so close as to cut off the view of other persons unnecessarily. Nothing should be placed so low or so high as to make it awkward for visitors to look at it.

If you expect a crowd, any tables carrying exhibits should be raised a foot or so from the floor, and if possible demonstrators should stand on platforms of the same height.

The exhibits will be arranged so that those relating to one idea will be grouped together and distinctly separated from those which relate to another idea.

If you have a series of tables or a long counter on which are displays of food you can separate the groups of foods by a space between tables or a broad colored tape or cardboard fence stretched across a table between groups.

Community Week

MISS MAXINE BIEBESHEIMER, R. N.,
Kendallville, Noble Co., Indiana

Such it was, a week for the community. The "community" meant everyone in the town of Kendallville, Ind. Even so the 6,000 inhabitants were not the only participants, for many miles around in neighboring towns the staging of "Community Week" had a dynamic effect. It was planned with the people, by the people and for the people. The interest was largely the result of wide publicity and a careful campaign plotted out months previously.

In the first place, a splendid committee was selected which in turn chose a chairman for each day of the week. The last named chose their own fellow workers, and each completed his own day's program as follows:

Monday: Community Night. A community spirit-rousing was given that continued through the week. A splendid Red Cross address was given and articles were exhibited from the local shops. An allegorical play, written by a citizen, aroused much merriment, also gave food for thought. At various times during the evening the local orchestra played old-time melodies, and community singing stirred everyone in tune to the occasion.

Tuesday: Dental Day. This day marked the first medical inspection of school children by local doctors. While it was restricted to dentists, a number of medical cases reported themselves, and the dentist made these notations, which assisted in marking a necessary new epoch, medical inspection for all school children. The findings of this day alone marked "Maximum result with minimum expenditure."

Wednesday: Go-to-School-Day. Two hundred and fifty patrons and friends of the public schools showed their interest in "Go-to-School-Day" by visiting the various classes and programs held in the different buildings. The pupils of each school participated in programs of patriotic, community and health work. For example, at the Central School a continuous program was given on each floor, consisting of music, physical drills, flag salutes, health talks by pupils, health plays, patriotic drills and regular lessons in hygiene. The Domestic Science Department gave a laboratory demonstration in the preparation of food substitutes which was both practical and instructive.

Thursday was Arbor Day, very timely and effectively carried out by the Boy Scouts, Junior Red Cross girls and the High School Botany class. A newly acquired city recreation park was the scene. Appropriate singing and speeches, together with the planting of the "Pershing Elm" marked a day both in Kendallville history and the lives of the young Americans who participated.

Friday was scheduled as "Big Parade Day." Such it was, the greatest parade and public demonstration ever held in Kendallville. Lodges, Societies, Clubs, factories, stores, etc., were in line with beautiful floats and slogans. The City Board headed the parade. City officials rode in automobiles and the Fire Department and Police were in line; schools were represented, hundreds of flags were flying, whole school rooms were transformed into Health Crusaders or represented a special health department. Fresh air fans and Boy Scouts, with their sleeping tents, filed in line. The tiny first graders who took the prize were dressed as Dutch Dolls imitating Dutch Cleanser. Their slogan was "Here's the Dope, use plenty o' soap." Even the Gold Dust Twins were in line. A magnificent float was made by the Junior Red Cross girls, which represented the 1917 Red Cross Seal, and received much comment, and served as the first warning that soon Seals would be on the market.

Nearly twice as many seals were sold as the year previous, the majority being sold in the schools. The Junior High School boys received the first prize for a very clever "Hooverized Float." Cash prizes were given for the best float and best slogan. Pictures were taken of the twelve best floats and were later shown on local screens.

While the Big Parade was written in large letters, there was something greater in the mind of the Chairman with which to close the day, *Educational Night*. A splendid address with stereopticon views was given by a very able speaker, "Mental Defectives and War." Another address, patriotic and appealing for Red Cross workers, was well received. The Carmena Music Club rendered several delightful vocal numbers and were repeatedly encored. The evening's program closed with a well pleased audience, each of whom was presented with a Fresh Air Fairy button.

On Saturday the school children were delighted with the beautiful fairy picture, "Cinderella." It was so arranged that all could attend, many children seeing their first picture show. So delighted was the manager of the picture house with the overwhelming audience and the result of the "Big Week" that he turned the entire proceeds over to the Public Health and Anti-Tuberculosis Society. This money, together with a sale which the committee previously held, paid all expenses and a very handsome sum was left in the treasury.

The Board of Health issued a warning of "Clean Up," and the city wagons hauled refuse for over a week. Thus it may truly be said about the program it was,

Each for all, and all for each.

To this extent the Community Nurse brought her report before the Mayor and his Council, who voted \$100 per month for the maintenance of a Public Health Nurse for the remainder of the year. The report was accurate and concise and spoke for itself.

Notes and Suggestions

Free Statistical Help

Through its Statistical Bureau the Metropolitan Life Insurance Company invites physicians, public health workers and social workers to make use of its valuable collection of mortality statistics. These statistics present the principal causes of death among white and colored wage-earners in the United States and Canada. The material covers over ten million individuals for each of the six years, 1911 to 1916. Death rates are available for each race, by sex and by age period. The company hopes in this way to aid in the study of disease and disability among wage-earners. It desires to stimulate medical investigation and research. By offering these statistics to the medical profession and to public health and social workers, the company expresses also its appreciation of the cooperation which it has received from physicians and others who have replied to inquiries and have given detailed information in thousands of cases. All inquiries should be addressed to the Statistical Bureau, Metropolitan Life Insurance Company, 1 Madison Avenue, New York City.

Pupil Nurses and Public Health Work

The Topeka Public Health Nursing Association reports an experimental course in public health nursing for local pupil nurses. The idea has been to give a pupil nurse from a local hospital as varied an experience as possible in public health work. She is sent out with the baby nurse, the school nurse, the tuberculosis nurse and others, with each of whom she gets more or less of the social service side of the work. It is hoped that this slight experience may stimulate a desire for further study along the lines of public health work.

Again a Problem

War problems—their number is legion, and every day brings a new one. The Tuberculosis Committee of the Charity Organization Society (New York City) has just issued a circular entitled "Our Tuberculosis War Problem," pointing out that if the man power of the United States is to win the war against autocracy every effort must be made to conserve the strength and vigor of her young men and women. In view of this, the tuberculosis war problem may be stated in terms of fitness. It is pointed out that in England, where the greatest precautions have been taken against tuberculosis, the death rate increased 17 per cent. among the non-combatants during the first year of the war. The surprisingly large number of cases of tuberculosis discovered through the draft examinations are indicative of the emphasis that should be placed on periodic medical examinations as a means towards conserving the nation's resources. Copies of this folder may be obtained from the Committee on the Prevention of Tuberculosis of the Charity Organization Society, 105 East 22d Street, New York City.

Striking Illustrations

Three illustrations, good ones, that make one stop, look and read, are the striking feature of a new circular being distributed by the Metropolitan Life Insurance Company. Rest, fresh air and good food are the subjects of the two-color illustrations, and the pictures are surrounded by a minimum of explanatory matter, which stresses the idea that tuberculosis is preventable and curable if these three factors are not neglected. Copies of this circular may be secured from the Metropolitan Life Insurance Company, 1 Madison Avenue, New York City.

Public Health War Service

"Save a day of health for the country's work" is a slogan suggested for a health campaign among school children which has been launched in Rhode Island by the Commissioner of Education. The aim of the campaign is to awaken in children an early interest in public health and an appreciation of its social importance, and to instruct them regarding the laws of health and its value as shown in war time. A circular accompanying the announcement of the campaign traces the connection between public health and war service as follows: "It is the first duty of every American to help win this war for democracy. It must be won by work. Work is diminished by illnesses which it is estimated lose more than 270,000,000 days annually among workers of the \$3 a day rank, thus hindering supplies of food, ammunition and ships. It is also estimated that about 1,500,000 people in the United States are ill every day. These illnesses among workers and others are mostly preventable."

An anonymous donor has offered to the commissioner of education a \$500 Liberty Bond to be awarded in place of a banner or other testimonial to schools whose pupils assist in increasing days of service by lessening illness. Every high and grammar school principal is invited to enter his school as one of 50 to cooperate in this war service. It is not necessary that all teachers and pupils in any school participate. The service may be carried on by a single teacher with a class of pupils. Reports covering a year's work are to be submitted annually to the commissioner from pupils undertaking the service. These reports cover three lines of effort:

1. Prevention of infection by mouth spray—campaign in community, including schools, for covering mouth when coughing and sneezing.

2. Prevention of infection by unwashed hands—campaign in community, including schools, for washing hands before touching food, drink, utensils and dishes.

3. Prevention of debility from overheated and otherwise bad indoor air—reports by pupil health officers of hourly temperatures in rooms and corridors, of air currents, dustiness, illumination, cleanliness of school premises and at soda fountains, in eating places, groceries, etc.; general temperatures in stores, libraries, churches, steam and

(Concluded on page 8)



The regular June meeting for Modern Health Crusaders has a subject of great importance and one which will make it unusually easy for league masters to interest children: "What to Eat and Drink, Food Protection, Typhoid Fever, Temperance." The timeliness of this meeting, when the season of heat and flies draws near, is apparent. Practically every community has a physician who can give a sprightly talk on some of the items of this subject, notably typhoid fever and the carriers of disease. As long meetings are not to be encouraged, part of this subject may be reserved for one of the months for which subjects are not prescribed in the manual.

The more progressive state boards of health will supply teachers and league masters with interesting material relating to the danger of unprotected food, polluted water and similar disease risks.

We refer Modern Health Crusade workers to the outline on teaching food values to children by Lucy H. Gillett in our May, 1917, BULLETIN. If you do not have this in your files, write for another copy. The New York Association for Improving the Condition of the Poor, 105 East 22d Street, will send free its "Food Allowances for Children." We recommend the purchase of the food charts of the A. I. C. P. Of these nine charts, several are adapted for the direct instruction of children, while others will be helpful in teaching parents. Apply to us for a special discount in the price of these charts.

(Where publications are free, we so state. Under the regulations for second-class mail, under which this BULLETIN is distributed, we are not permitted to quote prices for publications other than our own. Readers should write to publishers or to us for prices.)

There are very good charts in the booklet, "Childhood and Health," published by the National Child Welfare Association, 70 Fifth Avenue, New York. Through the Metropolitan Life Insurance Company and its agents you may secure "Food Facts," by Dr. Donald B. Armstrong, a very attractive free booklet, easily understood. "The House Fly as a Disease Carrier" is the name of a book of some size written by L. O. Howard. Libraries should be consulted for this volume.

On the subject of temperance, for which a special meeting will be assigned next year, we refer you to the Anti-Saloon League of your state or to the American Issue Publishing Company of Westerville, Ohio, for their effective temperance posters. They are published

also in circular form, 6 by 9 inches. We can furnish you without charge with a copy of the pamphlet, "The Effect of Alcoholic Indulgence on the Human Mind and Body," published by the National Anti-Saloon League, to furnish information for composition by school children.

Notes and Pointers

The Memphis and Shelby County Anti-Tuberculosis Association has set aside one thousand dollars for Modern Health Crusader work. This organization has set out to enroll the 22,000 school children of Memphis as Crusaders.

Interesting reports are received from nurses in the Town and Country Nursing Service of the American Red Cross. The Modern Health Crusaders, under the leadership of Miss Olive Dressel, R. N., Three Rivers, Michigan, have so many knights among them that funds for insignia have given out, but a health film show is planned to replenish the treasury. The league has an adult of each of the four wards to represent it, and each room in school has a captain and secretary to help with the health chore records. Miss Annie M. Casey, Red Cross nurse, reports that the Crusaders in Mason County, Kentucky, are doing a great work in cleaning up.

Miss Minnie T. Wilson, tuberculosis nurse for Washington County, New York, states that a number of rural school teachers are willing to give one of the health plays as public entertainment on the last day of the school year.

Miss Irma Collmer, secretary of the Anti-Tuberculosis League, of South Bend, Ind., writes: "We certainly do get good reports from Modern Health Crusader work. One superintendent reporting on a township teachers' institute last month said a discussion came up at their last meeting regarding the fact that there had been so few cases of contagious disease, when heretofore they had never escaped without some epidemic of measles, scarlet fever, etc., during the school year. Several of the teachers rose with one accord to give the credit to the Modern Health Crusade. It seems such a tangible way of reaching the children, and it seems to appeal to the teachers."

Mrs. Catherine R. Athey, executive secretary of the Idaho Tuberculosis Association, writes that she wishes prompt delivery of a large order of knight's pins, as "all my organized towns are doing a land office business. I had no idea that so many children would qualify. The teachers in charge are all delighted with the work and do not hesitate to say that colds and usual epidemics are lacking where the chore sheet has been kept."

The Modern Health Crusader league at San Anselmo, Cal., one of the penultimate winners, reports that it works as part of the Junior Red Cross. Not only the Junior Red Cross, but Boy Scouts and other organizations, as well as the schools, are able to take up the Modern Health Crusade as a phase of their work. It supplies the method of teaching personal hygiene which is of

most interest to children and correspondingly the most effective.

Mrs. L. R. Browning, president of a Michigan parents'-teachers' association, writes of the Crusade: "I feel that it furnishes the inspiration for which we have been longing in our work. A movement which will save the energy required to supervise the daily duties of five children would prove a boon to this mother and doubtless to a million others."

Notes and Suggestions

(Continued from page 7)

street cars, hotels, city hall, state house, court rooms, etc.

The school showing the best record at the end of the year is to hold the \$500 Liberty Bond for one year and cashes the coupons when due. In 1922 the bond is to become the property of the school whose report for the year shows the greatest rate of percentage of improvement over 1918. In determining this rate, health statistics, conditions, habits in schools and community count 90 points, and the merits of the report itself count 10 points. A \$100 Liberty Bond is to be awarded similarly to schools holding second place during these five years. The commissioner shall publish each year an honor list of schools sending reports of reasonable merit.

Some suggestions for carrying on the School Public Health War Service are made. For instance, each pupil may report daily for the first fortnight the number of uncovered coughs and sneezes counted everywhere since the day before. The daily totals and places where obtained can be written in 200 or 300 word stories and the best sent to local papers for publication. Cartoons with reading contexts can be suitably prepared and sent to papers, placed in libraries, schools, etc. Simple and complex problems in health and social statistics are suggested as a means of testing efforts by results obtained instead of by "enthusiasm." As an exercise in mathematics, problems like the following may be given: For how many of the 270,000,000 days is Rhode Island responsible (approximately)? What is a reasonable expectation of reduction?

TWO NEW SECRETARIES

(Continued from page 2)

York School of Philanthropy. He has had extensive experience in associated charities work, serving as secretary of organizations in Columbus, Ohio, Charlotte, N. C., Bridgeport, Conn., and elsewhere. He was field secretary for the Ohio Anti-Saloon League and secretary of the North Carolina Red Cross Seal Commission. For the past two years Mr. Myers has served as assistant secretary of the New York City Committee on the Prevention of Tuberculosis. In this capacity he has directed the sale of Red Cross seals, increasing the sale from 3,400,000 to 5,400,000. Mr. Myers will serve not only as field secretary but as assistant sales manager in the Red Cross seal campaign.

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BULLETIN

OF THE

National Tuberculosis Association

NOV 2 191

Vol. IV

JUNE, 1918

No. 9

Exchange Service and Constructive Publicity

It has always been the purpose of the National Tuberculosis Association that all publicity for which it has been responsible should in its character be thoroughly *national*. This has been interpreted to mean that such publicity should include not only the objectives and results of the National Association, however broad these may be, but also whatever there is in the programs and accomplishments of state and local associations, and indeed in anything emanating from institutions or individuals anywhere, which possesses nationwide significance and value. With the engagement May 1 of a Publicity Secretary, the National Association hopes to extend its activity and possible usefulness in this direction.

To aid in accomplishing this, it has been decided to revive and expand a plan formerly in operation, but recently more or less sidetracked by other matters, by which the National Association will henceforth conduct what will be virtually a bureau for the collection of information and material from state and local associations and other sources, the distribution among this constituency of such of this matter as appears to have sufficient value, and the incorporation into general publicity of such ideas and concrete achievements as warrant nation-wide attention by reason of their intrinsic worth.

This exchange bureau will collect both regular and special publications of tuberculosis agencies throughout the country and will go over them from the points of view both of their content and of their suggestiveness as forms of publicity. In some cases request may then be made from the source agency for enough copies of a particular publication to distribute among the other members of the exchange group. Or either excerpts or comment may be multi-graphed for distribution.

Many local matters of interest will not be described, however, or at any rate adequately described, in such publications. Social workers frequently realize, indeed, that some of the best things fail to get into print. Concerning these the exchange bureau will have to obtain the facts by letter from those who

tern slides, motion pictures, exhibits and every possible device for putting good ideas "across."

As far as appropriate and practicable, the monthly BULLETIN of the National Association, which now has a circulation of some 8,000 copies, will be used as the medium for the proposed inter-

change; though some items may be circulated without mention in its columns and others may go farther into special stories or news bulletins. In this connection, it is well to bear in mind what the BULLETIN's function is. It is *not* intended to report scientific medical research affecting tuberculosis; that is the field primarily of THE AMERICAN REVIEW OF TUBERCULOSIS, and from a lay point of view of the JOURNAL OF THE OUTDOOR LIFE. It is *not* meant to carry ordinary news, including personal items; for this too the JOURNAL does. It is designed to be the house organ of the National Association and of the national constituency of tuberculosis workers, and as such to deal principally with methods and results in the general promotion of the anti-tuberculosis campaign. There is no sufficient reason, however, why the presentment of methods and results, in addition to permanent evidence value cannot have a large measure of current news value as well.

It is doubtless self-evident that the successful carrying out of the plan above described, and the readability and value of the BULLETIN as related thereto, will depend no

more upon effort expended by the National Association than upon response and cooperation on the part of state and local secretaries and other workers. Before any local information can be distributed, it must be had; and to be had it must be sent in by the agency or individual responsible in the locality. The National Association is desirous of doing its part.



Tuberculosis germs become active when the body is weak and vitality is low

A4.

("Health of Soldier," see page 2)

are locally responsible. While results actually accomplished will be given first place in the distribution, plans in view, new experiments in process, and even attempts which have failed will also receive attention, for these too have their due exchange value. First and last, moreover, a special interest will be taken in methods of publicity, including not only printed matter, but lectures, lan-

BULLETIN OF THE National Tuberculosis Association

Published Monthly
In the Interest of Workers Engaged in the
Anti-Tuberculosis Movement by the
National Tuberculosis Association
381 FOURTH AVENUE NEW YORK CITY

Vol. IV June, 1918 No. 9

Entered as Second Class mail matter, October 21, 1914, at the Postoffice at New York, N. Y., under the Act of August 24, 1912

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Now you, wherever you may be in whatever section of the country, *do your part*. First write Mr. Daniels, as Publicity Secretary, expressing your wish to take an active share in the exchange. Then put him on your mailing list to receive your material, including duplicates of whatever you may at present be sending to the general office of the Association. But do not stop there. Keep Mr. Daniels more closely informed by frequent letters about what you are doing. If all of you do this, then with a good deal coming in there will also be a good deal going out, and you will find the BULLETIN constantly more serviceable in your work.

Payment for Small Orders

Those who purchase supplies from the National Association are requested to observe a new rule under which in future orders totaling less than one dollar cannot be filled unless payment is made in advance.

As the Association sells material at or as near cost price as possible, and as the expense of bookkeeping and collecting involved in many small accounts is considerable, it has become necessary to put this rule into effect.

Soldiers and Sailors Present Federal Provisions

A pressing problem of the war is the vocational rehabilitation of disabled soldiers and sailors. Legislation is pending and there are the usual inevitable differences of opinion as to departmental control, in which the War Department, the Bureau of War Risk Insurance and the Federal Board of Vocational Education are involved. A Committee on Federal Legislation of the National Tuberculosis Association is giving continuous and intensive study to the whole situation, but with particular attention to the needs of the tuberculous. It is the policy of the Surgeon General that no disabled soldier shall be discharged from the army until he shall have been cured, or as nearly cured, as his disability will permit. By "cured" is meant functional restoration.

It is of special importance that men suffering from tuberculosis shall have prompt and continuous care, which, in the vast majority of cases, would not be possible if they were permitted to leave the service entirely at their own discretion. The will to get well is not very strong in the average man. Military supervision will be of vast benefit in bringing about an arrest of the disease, as was pointed out more fully in the BULLETIN for March. The Surgeon General's office appreciates that difficulties will be met in holding tuberculous soldiers indefinitely. It is possible that a time limit of three months will be placed upon compulsory treatment in the army sanatorium, and that thereafter the soldier may be discharged upon his own request.

It is considered desirable to have a tuberculosis sanatorium connected with the special hospitals or reconstruction units of which there is to be one in each of the sixteen military divisions of the country. The government sanatoria for tuberculosis, to be located at Denver, Colo.; Azalea, N. C.; and Otisville, N. Y., are now under construction. There are more than 700 patients at Fort Bayard, N. M.; the receiving hospital at New Haven, Conn., is in full operation, and Whipple Barracks, Ariz., is being rapidly put in shape by Major Holmberg as a receiving station.

It is imperative that all tuberculosis workers be informed of the plans and progress of the government in this direction. More detailed information will be printed in a subsequent bulletin.

"Health of the Soldier" New Poster Exhibit

An exhibit of 15 posters on the "Health of the Soldier" has been prepared and made available by the National Tuberculosis Association for general distribution at a price of \$4.00 for the set.

The exhibit was originally prepared for use in the military camps as a part of the educational campaign of the National Association. The demand from those who saw it was so great, however,

New Buildings Restricted Federal Ruling Sets War Limits

Under the requirements of the United States Government all issues of bonds, stocks or other capital required for the erection of new institutions or additions to existing ones must be approved by the Capital Issues Committee of the Federal Reserve Board with headquarters at Washington, D. C. The National Association has been in conference with the Federal Reserve Board in this connection and finds that while its members express the greatest interest in the public health campaign and fully appreciate the need for more tuberculosis hospitals at this time, they are unwilling to approve of the issuance of any bonds or other securities for the establishment of new buildings until after the war, except buildings of the most temporary nature and the most inexpensive construction, holding that capital at present available in the United States is needed for more immediate war purposes. The Capital Issues Committee apparently will approve, however, of the building of temporary wooden or other structures for hospital use.

The Association expects to prepare at once a pamphlet giving designs of institutions built along the most temporary lines that will meet federal requirements. In order to help us in the preparation of this pamphlet, all who are interested are urged to send the Association such information and material regarding suitable inexpensive structures as would be of value for this purpose.

that it has been decided to reproduce the original exhibit in poster form for use among the civilian population.

The exhibit is divided into three sections of five panels each. The first group of panels deals with contact infection and shows how coughs, colds, measles, pneumonia, tuberculosis, and other diseases are spread by carelessness in spitting, coughing and in contact of various kinds. The second section deals with the prevention of such diseases and shows how ordinary common sense and knowledge in covering the mouth in coughing, spitting or sneezing, combined with the use of individual utensils and periodic medical examinations, will safeguard against the spread of disease. The third section deals with fitness for fighting, shows in striking contrast that the best fighter is the fit fighter, and appeals to everyone to be fit as a patriotic duty.

The posters (*see sample reproduction, page 1*) are reproduced on heavy lithographic paper, size 22 by 28 inches, printed in two colors. The original drawings for the exhibit were made by James Daugherty, an artist of national reputation.

As the supply at the price mentioned is limited, orders should be sent in at once. An attractive descriptive booklet, useful also for educational purposes, will be sent on receipt of two cents to cover postage.

Kansas City Conference Illinois Plan Discussed

Readers of the BULLETIN will be interested in some points brought out at the Kansas City luncheon on May 20, at which the subject of the care of the tuberculous soldier was discussed. The luncheon was held in connection with the National Conference of Social Work, and over 70 delegates attended.

Mr. Frederick D. Hopkins, field secretary of the National Association, opened the discussion. He stated that the Association had already received over ten thousand names of discharged tuberculosis soldiers from the Surgeon General's office.

Dr. George Thomas Palmer, of the Illinois Department of Public Health, introduced Dr. J. L. Gillin, Director of Civilian Relief, Central Division, American Red Cross, who explained in detail the agreement recently signed by the Illinois Department of Public Health, the Illinois Tuberculosis Association and the American Red Cross. He emphasized the opportunity presented for the Home Service Committees. It was thought wise, he said, to have these Committees make the first contact with the tuberculous soldier, obtaining and supplying social information as distinct from medical information, after which the tuberculosis association could arrange for a diagnosis of the case and for proper treatment, reporting the facts to the Red Cross. Dr. Gillin also brought out the educational value of this work in the different communities, and the fact that it was not charity but distinctly a form of service which the Red Cross was under obligation to render the returned soldier.

Dr. Palmer outlined the preliminary Illinois campaign, including the formation of local committees in each county and the results obtained in persuading counties which have never before given any money for tuberculosis work, to appropriate funds now. A three days' institute for health officers was held in Springfield, in order that more of these officers could serve as examiners of soldiers in the counties. Dr. Palmer concluded by praising the Central Division of the Red Cross for its efficient work, especially in educating its Home Service Committees to a fuller understanding of the present problem.

A lively discussion followed, in which a dozen or more of those present took part and which apparently would have continued through the afternoon had it not been necessary to adjourn on account of other meetings. Mr. George J. Nelbach of New York advised having a nurse of the tuberculosis agency made a member of the Home Service Committee, thereby enabling the nurse to make the contact as a representative of the Red Cross. This plan has been approved by the American Red Cross.

Modern Health Crusaders' Department

As subject for a July meeting, we recommend posture and care of the feet. Crusader workers should apply to the American Posture League, 1 Madison Avenue, New York, or to us for free literature and for quotation of prices on the League's admirable posture chart.

The May and June issues of *How to Live*, the monthly journal of the Life Extension Institute, contain excellent material on this subject. League masters may readily interest children with the pictures, such as those of the soles of Filipinos who have never worn shoes and that of a soldier standing in correct posture. The information about correct footgear is important for parents and children. This magazine is regularly sent to persons who subscribe to the service of the Life Extension Institute. Through the courtesy of Dr. Eugene L. Fisk, medical director, we are able to make a special offer of free sample copies of the May and June issues and also of literature descriptive of the service of the Institute to all league masters (within reasonable numbers) who apply for them. Address the Life Extension Institute, 25 West 45th St., New York.

The subject for the June meeting was covered in the May BULLETIN. Every league master may secure a free copy of that issue and also a year's subscription to the BULLETIN free on application.

Notes and Pointers

The Community Health and Tuberculosis Demonstration, located at Framingham, Mass., has been conducting the Crusade along intensive lines under the direction of Miss Mary Ann Abel, educational assistant.

2,000 Chore Score Cards After six weeks' practice on the part of 2000 school children in keeping

the daily health chores, a study was made of the reactions of the children to the chores. The score cards were kept by children in the six grammar grades beginning with the fourth. The children, ranging from nine to thirteen years of age, were from a rural school and seven public schools in Framingham. The highest number of points scored by a single school was made by the rural school. At the end of six weeks the children were polled to determine which of the eight chores was the most difficult to remember and which was the easiest. 440 children, a plurality, voted that the easiest chore to remember was the washing of hands before each meal, and 466 children voted that the most difficult chore was to drink a glass of water before each meal and before going to bed. The next most difficult chore was brushing the teeth in the morning and in the evening.

Composition Contest The children in the fourth grade of the Framingham schools, of an average age of nine, wrote compositions on the Crusade in competition for a prize. The winning composition by Ruth Knapp is as follows:

"Long ago the Turks had possession of the Holy Land. When the Christians came to worship God the Turks fought and killed a lot of them. A band of men from all over the world gathered. This band was called Crusaders. They went to the Holy Land to try to drive out the Turks.

"We are trying to be Modern Health Crusaders. The germs are the Turks. To drive out the germs we must do what the Modern Health Crusader card tells us to do. We do these things: wash our hands and drink a glass of water before each meal, play out of doors half an hour, brush our teeth in the morning and evening, take ten or more deep breaths of fresh air, spend ten or more hours in bed with the window open, sit and stand straight. I am trying to be a good Modern Health Crusader."

Nuggets of wisdom have been picked from some of the other compositions.

"When I get to be a man I will get a good job because clean men always get the best jobs." "A little girl said to her sick mother: 'Mother, if you will do what I do in the Crusader list you will never be sick again.'" "I would like to grow up like George Washington. He was great because he took his bath when he ought to. He stood up straight and that is why he became such a good soldier."

Miss Abel reports that the work increases in interest and that teachers and mothers are blessing the Modern Health Crusade hourly.

Indian Crusaders Miss Carol F. Walton, executive secretary of the Arizona Anti-Tuberculosis Association, has begun Crusader work among the Indians. It is felt that the M. H. C. methods and insignia will appeal to adults as well as children in this group.

News from Virginia Miss Lena G. Townsend, school nurse of Fairfax County, Virginia, tells of effective methods of interesting Crusaders:

"During the last ten days the pupils in eleven schoolrooms have been organized as Crusaders, and they are very enthusiastic. My eighty-seven schools are all rural, and I shall when possible hold meetings on porches of schools or in groves. My plan has been to meet them a week after organizing, and in a short talk on 'Living Out-of-doors' I hold their interest by demonstrating the method of making a Klondike bed. I use a suitcase, some newspapers, small blankets, sheets and pillows. My aim is to get some open-air schools or open-window schools in Fairfax County."

100 Per Cent. Enlistment The M. H. C. league of which Miss Jessie Hill of Tolley, N. D., is master consists of all the pupils enrolled in her school, thirty-two. "I can see a marked improvement in the health and appearance of my pupils since we started this work."

This Year's Design Red Cross Christmas Seal



The design of the Red Cross Christmas Seal is shown by a rough cut on this page of the BULLETIN. The seal itself, which will be printed in red, green and brown-black on white coated paper, will be substantially of the same size as

the 1917 seal, a little less than a square inch in area. The artist for the 1918 design is Charles A. Winter, of New York, the well-known painter and illustrator for magazines. Some years ago, the American Red Cross conducted competitions for Red Cross seal designs; but, as a matter of professional etiquette, the best artists did not compete. During the last three years, the American Red Cross has engaged qualified artists to furnish designs; and it is practically the unanimous opinion of Red Cross seal sales managers, as expressed to the national organizations, that a great improvement has resulted. It is confidently expected that the 1918 design will be acclaimed as far superior to any of its predecessors.

It requires no close study to grasp the design's significance. Liberty, personified as a goddess, is under arms; but in her right hand she still holds aloft a blazing torch. The torch stands alike for the spirit of liberty and, in classic interpretation, for the healing of disease. Thus the close relation between the battles against the country's armed foes and against tuberculosis is symbolized. The red cross carries its patent message of mercy. The holly leaves represent the spirit of Christmas.

Up to the time of the world war, Red Cross seal agents generally seemed to favor a Santa Claus stamp, although exception was taken by agents in territory with a considerable proportion of population originating from countries or representing sects which objected to Kris Kringle as a heathen deity or as standing for a deception. The 1917 seal was a step in the evolution from the merely Christmas spirit to the spirit of humanity and democracy. The Christmas tree crowded out Santa Claus. In the 1918 seal, as a further step in the evolution, the Christmas idea yields primacy to the spirit of patriotism.

Standing of States

1917 Seal Sale

Per
No. Seals Capita
Sold Sale

Class A—Populations up to 1,250,000

1. Wyoming	1,022,012	7.247
2. Arizona	1,087,510	4.122
3. Montana	1,812,358	3.832
4. Rhode Island....	2,213,157	3.570
5. South Dakota....	2,028,432	3.485
6. Nevada	350,290	3.163
7. New Hampshire..	930,200	2.417

1917 Sale 180 Millions Indianapolis Second—Class 8

The further receipt of final reports from state agents indicates a total sale of 180 million seals in 1917, 5 million more than reported in the May BULLETIN. The increase is 70 per cent. over 1916.

The mark for the 1918 sale set by the national organizations is a minimum of 300 million. Plans have been formed for the closest cooperation between the American Red Cross and the National Association throughout the year. The increased publicity and assistance rendered by the Red Cross chapters coupled with universally growing public generosity and the realization of the vital relation between the health campaign and ultimate victory in the war are factors on which the prediction of a greatly enlarged sale is based. A sale of a half billion seals this fall would seem to be within possibility.

Through a clerical error in reporting the Inter-City Red Cross seal competition in the May BULLETIN Louisville was listed as holder of second place in Class 8. Indianapolis, with a per capita sale of 5.69, holds second place, while Louisville comes third with 5.66.

8. New Mexico.....	940,763	2.220
9. Colorado	2,016,330	2.040
10. Utah	896,704	2.020
11. Vermont	715,919	1.961
12. Idaho	686,232	1.541
13. Maine	1,081,217	1.390
14. Hawaii	273,810	1.246
15. North Dakota....	411,656	.619
16. Florida	483,218*	.489
17. Delaware	100,727	.468

Class B—Populations from 1,250,000 to 2,400,000

1. Minnesota	8,400,000	3.632
2. Connecticut	4,038,634	3.445
3. Iowa	4,220,836	1.763
4. Washington	2,693,231	1.686
5. Oklahoma	3,511,939	1.533
6. Maryland	1,871,851	1.362
7. Kansas	2,021,687	1.237
8. Kentucky	2,688,767	1.123
9. West Virginia....	1,558,765	1.103
10. Virginia	2,259,804	1.011
11. Nebraska	1,218,167	.948
12. Tennessee	2,046,900	.888
13. Arkansas	1,404,256*	.794
14. Alabama	1,732,207*	.733
15. Louisiana	1,054,068*	.621

Class C—Populations over 2,400,000

1. Wisconsin	8,201,958	3.244
2. New York.....	29,328,533	2.956
3. Illinois	16,291,980	2.612
4. New Jersey.....	7,390,476	2.489
5. Indiana	6,379,942*	2.250
6. California	6,053,262*	1.998
7. Michigan	5,372,571	1.736
8. Ohio	7,534,236*	1.445
9. Pennsylvania ...	12,146,686*	1.402
10. Texas	4,613,362	1.021
11. Massachusetts ...	3,588,452	.934
12. North Carolina...	1,754,102	.720
13. Georgia	1,695,641	.544

* Based on preliminary report.

New Officers

At the annual meeting at Boston, June 6-8, the following officers of the National Tuberculosis Association for the ensuing year were elected:

President
Dr. David R. Lyman, Wallingford, Conn.
Honorary Vice-Presidents
Hon. Theodore Roosevelt Sir William Osler
Col. George E. Bushnell

Secretary
Dr. Henry Barton Jacobs, Baltimore, Md.
Treasurer
William H. Baldwin, Washington, D. C.

Executive Committee
Dr. Edward R. Baldwin, Saranac Lake, N. Y.
William H. Baldwin, Washington, D. C.
Dr. H. E. Dearholt, Milwaukee, Wis.
Fred. L. Hoffman, Newark, N. J.
Dr. O. W. McMichael, Chicago, Ill.
Dr. George Thomas Palmer, Springfield, Ill.
W. Frank Persons, Washington, D. C.

New Members Board of Directors
Isaac Adler, Rochester, N. Y.
Dr. W. Jarvis Barlow, Los Angeles, Cal.
Col. Frank Billings, Chicago, Ill.
Col. George E. Bushnell, Washington, D. C.
Geo. F. Canfield, New York, N. Y.
Col. A. M. Forster, New Haven, Conn.
Dr. Alfred Henry, Indianapolis, Ind.
Mrs. C. F. Hodgson, Atlanta, Ga.
Dr. Thomas McCrae, Philadelphia, Pa.
Dr. Alfred Meyer, New York, N. Y.
W. Frank Persons, Washington, D. C.
Miss Agnes D. Randolph, Richmond, Va.
Bolton Smith, Memphis, Tenn.

The registered attendance at the Boston meeting was approximately 600 persons, representing nearly every state in the Union. In point of interest and significance, it was generally agreed that this was the best meeting which the Association has ever held. An account will appear in the June number of THE JOURNAL OF THE OUTDOOR LIFE, and certain action taken will be mentioned in the next BULLETIN.

High Points in Four States Described in The Survey

Under the title "Fighting Germs with Accurate Knowledge," *The Survey* for June 1 describes briefly some important recent and pending developments in tuberculosis work in four states: Oklahoma, Illinois, Connecticut and Massachusetts.

The Oklahoma association, with the cooperation of the state boards of health and agriculture, is about to make health surveys in the large cities of that rapidly growing commonwealth. In Illinois, similar surveys of every county are to be made by the state association with the assistance of the division of surveys and rural hygiene of the state health department.

Middletown, Connecticut, has just completed a health survey under the direction of the Department of Public Health of the Yale School of Medicine. It is hoped that extension of the city's health work and the forming of a tuberculosis association will result.

The Survey article, to which BULLETIN readers are referred for further details, also mentions monograph No. 1, entitled "The Program," of the Community Health and Tuberculosis Demonstration at Framingham, Massachusetts. Copies of this may be had free on request of the National Tuberculosis Association. Beginning with the July issue, the BULLETIN will in future contain a section on current developments in the Framingham work.

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BULLETIN

OF THE

National Tuberculosis Association

NOV 2 1918

Vol. IV

JULY, 1918

No. 10

Progress Regarding Tuberculous Soldiers

Since the article on "Following Up Tuberculous Soldiers" was published in the March BULLETIN, new developments have taken place in connection with this problem which make a further report advisable at this time.

Following the adoption in Illinois of an agreement between the state board of health, the state tuberculosis association and the division office of the American Red Cross (full text of which was printed in the May BULLETIN) a number of other states have worked out plans of procedure which, while similar in their general features, in some cases embody important differences.

Among the central states, Michigan, Wisconsin, Iowa and Minnesota have made definite arrangements. The Michigan plan follows that of Illinois closely. In Wisconsin there are substantial modifications, but none which need be mentioned here. In Iowa, advantage is taken of a state law under which the county commissioners may be required to expend \$15.00 a week for the care of a tuberculous patient; and the central division of the Red Cross has urged its home service sections to avail themselves of such public resources, supplementing the expenditure if necessary.

The Minnesota agreement applies not only to discharged soldiers but is broadened to include the collection of information regarding men rejected in the draft. Therein it takes account of a problem which, as regards numbers involved, is of course much greater than that which is confined to men subsequently discharged from the army. The initial contact in all cases is to be made by the Red Cross, except where "local health departments express a willingness" to do so,—this exception applying to Duluth, Minneapolis and St. Paul. It is also provided that the services of medical experts for diag-

nosis, instruction and public lectures are to be supplied by the Advisory Commission of the State Sanatorium for Consumptives, which is a party to the agreement. All public health nursing service required will be furnished by the Minnesota Public Health Association. In the event that funds cannot be obtained from other agencies

North Carolina and perhaps by this time in the other states. As in Minnesota, this agreement provides for securing information regarding men rejected in the draft. The Red Cross does not agree to take any part in securing treatment for these men, this apparently being regarded as outside the scope of home service sections, but the other two

agencies—that is, the board of health and the tuberculosis association—are permitted to use the reports regarding these men from home service sections as the basis for developing local interest in obtaining treatment from other sources. The financial arrangement is that the Red Cross will pay for the temporary care of the discharged soldier, and that "in the more permanent treatment it will be the policy of the Red Cross to provide for one-third or more of the necessary expenses, as determined by the exigency of the case, over and above what the family can provide." Initial contact is to be made by the Red Cross except in localities which have tuberculosis societies.

Definite plans are either completed or now pending in New England and other parts of the country, as to which it is hoped that detailed report may be made in the next BULLETIN. State associations are urged to send such information to the National Association at once, in order that it may become available for the country as a whole. Doubtless some plans will be more or less modified by

actual experience, and it is important that each state should be able to profit by the experience of others.

Position of Red Cross

In the case of all the agreements here mentioned, cooperation between health authorities, tuberculosis associations and the Red Cross is a basic principle. The
(Continued on page 2, column 1)



Your country demands fitness,

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for the treatment of tuberculous patients, the entire expense of such care as is provided is to be borne by the local chapters of the Red Cross.

The southern states of North Carolina, South Carolina, Georgia and Tennessee recently conferred at Atlanta with the southern division of the Red Cross, and reached an agreement which has already been signed in

BULLETIN OF THE

National Tuberculosis Association

Published Monthly

In the Interest of Workers Engaged in the
Anti-Tuberculosis Movement by the

National Tuberculosis Association

381 FOURTH AVENUE NEW YORK CITY

Vol. IV July, 1918 No. 10

Entered as Second Class mail matter, October
21, 1914, at the Postoffice at New York, N. Y.,
under the Act of August 24, 1912

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attitude of the Red Cross concerning its own part in such cooperation is indicated by the following quotation from a recent letter written by Curtis E. Lakeman of the Department of Civilian Relief of the Red Cross to Dr. Charles J. Hatfield, Executive Secretary of the National Association:

"I trust there is no longer doubt in anyone's mind that the Red Cross, at least in principle, accepts full responsibility for assisting in the after care of soldiers discharged on account of tuberculosis as well as those discharged on account of any other disease or disability. The constitutional purpose of the Red Cross is to furnish aid and comfort to soldiers and sailors. This necessarily includes service to their families. When a soldier or sailor is discharged from the service on account of wounds or disease, the Red Cross will not abruptly break off these relations of service, but will recognize that its responsibility must continue until the man is on his feet again as a private citizen or until the burden of his permanent care is taken over by the appropriate civilian agencies. We visualize our interest in and responsibility for discharged men as a single problem regardless of the cause of disability. With respect to tuberculosis, we have entered upon a working agreement with your Association under which we are endeavoring to discharge our own responsibility in the spirit of the most thorough cooperation with the expert local agencies. Wherever no local association exists, we recognize the responsibility of the local Red Cross to step from third into second place and to endeavor to provide necessary advice and assistance in regard to the care and prevention of tuberculosis. In any event, the principle remains clear that the home service section of

the Red Cross must provide relief when necessary, as well as giving such service as advice in the filling out of applications for compensation under the War Risk Insurance Law.

"In practice, as we have indicated before, the principle is conditioned by the financial resources of the local chapter and of the home service section. This is a corollary of the still broader principle of Red Cross local autonomy whereby each chapter raises and disburses its own funds. The principle of Red Cross local autonomy is revealed in the present decentralized administration, and with regard to the problem in hand, it means that each division director of civilian relief is in a position to work out local understandings with the state tuberculosis associations and the state public health authorities, which may or may not be identical with similar agreements in other divisions, although of course all will be expected to be consistent with the general understanding which exists between our respective national organizations."

It has also been plainly stated by the Red Cross that funds of local chapters are intended primarily for home service, which includes provision for returned tuberculous soldiers. The following quotation is from a letter sent by H. D. Gibson, General Manager of the Red Cross, to all division directors:

"Whenever an individual chapter feels unable or unwilling financially to undertake home service, you are authorized to state to the chapter concerned that its funds should be used so far as needed for the welfare of the families of soldiers and sailors in that community, even if the result must be the curtailment of work along other lines. The only Red Cross funds available for Home Service are those of the chapter itself, whereas the surplus funds of all chapters can be used if necessary for general relief supplies.

"It should be made definitely certain that a chapter with funds, no matter how limited, should not neglect its home service obligations, because to do so will likely cause the families of soldiers and sailors there to suffer privation or to oblige them to sacrifice health by reason of overwork, or unsuitable work, or to apply to public or private charities."

Effect of Army Policy

The whole problem of providing treatment for returned soldiers will, of course, be more or less affected in the future by the new policy of the Surgeon-General which, as stated in the May BULLETIN, proposes that no disabled soldier shall be discharged from the army until cured or as nearly cured as his disability permits. It is understood that under this policy tuberculous soldiers will be kept in the army for a time at least, after which they may be discharged if they so desire. It is also understood that henceforth all men received by the army will receive a special examination for tuberculosis almost immediately upon arrival, and that subsequent discharge will be "in line of duty," which means that the men thus discharged will be eligible to compensation from the Bureau of War Risk Insurance. While this new policy will be of much benefit, it by no means follows that it will solve the problem. Inasmuch as such restoration as might be called a complete cure would in the case of tuberculous soldiers require a long time, and as large numbers of soldiers will doubtless request and obtain discharge before such a lengthy period has expired, the problem of their full recovery and return to normal activity will still be up to the local community and the civil authorities. It is advisable, therefore, at least for the present, not to allow this modification of army

policy to lessen the vigor and scope of civilian preparations to meet and solve this problem.

Individual Results Necessary

Plans and agreements, such as those already adopted, are of course essential to a systematic attack upon this problem. But vastly more important are the concrete individual results, in the way of establishing actual contact with and providing appropriate treatment for soldiers discharged on account of tuberculosis, and as far as possible, men rejected in the draft for the same reason. Some reports which have reached the National Association from specific localities indicate that although the names of discharged soldiers are being received according to plan, on account of addresses which are either lacking or incorrect, and for various other reasons, substantial contact results in only a minor percentage of cases. Such contact, however, consisting not merely of the sending of a letter, but of actually getting in touch with the individual, is the final nub of the whole matter. The most elaborate agreements will be futile unless real contact, plus such provision of treatment as proves possible, is accomplished.

Dr. Hoffman's Review

Dr. Frederick L. Hoffman's annual review and study of the death rate from tuberculosis appears in *The Spectator*, New York, of June 6, and may be obtained in reprint form by writing to Dr. Hoffman, at the Prudential Life Insurance Company, Newark, N. J.

In connection with the anti-tuberculosis movement, the following quotations have special interest:

"For the first time in many years," Dr. Hoffman states, "the tuberculosis death rate of American cities shows a distinct upward tendency, in contrast to a persistent decline in the past." . . . The increase, while not alarming, is nevertheless significant, and possibly in a measure attributable to war conditions."

"The National Tuberculosis Association is engaged in a task of tremendous magnitude, which has never, from the outset, received the public, corporate and private support urgently demanded by the interests at stake. As observed in the review of the tuberculosis death rate for 1916, 'The statistical evidence is entirely conclusive that, in the main, the various efforts have been in the right direction, and the results challenge favorable comparison with corresponding efforts in any other field of human endeavor for the improvement of the social and sanitary condition of the people.' The National Tuberculosis Association was never more thoroughly organized than it is at the present time or better prepared for an active campaign throughout the entire nation, aside from the valuable services which are being rendered to the Government and the National Red Cross, in connection with the problem of tuberculosis in the army at home and abroad."

War-Time Building

The following resolution was adopted at the annual meeting of the National Tuberculosis Association, held at Boston, June 6-8, in reference to new hospital and sanatorium construction during the war:

Resolution

"WHEREAS, the National Tuberculosis Association and its affiliated agencies fully appreciate the necessity for prompt increase in the number of beds available in tuberculosis hospitals and sanatoria throughout the United States; and

"WHEREAS, the Federal Reserve Board of the United States Government through its Capital Issues Committee has taken the position in some cases brought before it that the issuance of bonds and other securities must be limited to construction of a temporary nature only; and

"WHEREAS, the National Tuberculosis Association realizes that this action is in danger of decidedly hindering the construction of necessary tuberculosis hospital facilities throughout the country; and

"WHEREAS, the National Tuberculosis Association and its affiliated agencies desire "to work heartily and earnestly with the President and the Government in taking the course which will do the country the most good with the least harm,"

"RESOLVED, that the National Tuberculosis Association urges upon all communities in the United States the necessity of promptly increasing their hospital provisions and of planning them in such a way as to minimize the difference between permanent and temporary construction; and

"RESOLVED further, that the Capital Issues Committee be urged to allow permanent buildings to be constructed in all cases where the difference is not too great, in order that it may not be necessary to repeat the process a few years later, or to waste the money which it is so difficult to obtain for any kind of construction."

Later Information

Since the adoption of this resolution, however, additional information has somewhat modified the previous understanding of the Capital Issues Committee's ruling. This ruling now appears to be less rigid than was first believed, while at the same time the attitude of the Committee is reported to be that of open-mindedness to the facts and actual needs.

While the following points are not yet entirely cleared up, and are therefore not submitted as final, it now appears that the Committee does *not* limit all construction to buildings of a purely temporary character, but that permanent buildings may be approved, if the difference in cost is not too great; and that under some circumstances, as, for example, the building of a sanatorium for advanced cases in colder regions, the usual type of permanent structures will probably be allowed. Construction

which does not require the issuance of bonds or other securities or which necessitates the issuance of not more than \$100,000 in bonds, is not subject to the ruling.

It is of course vitally important that tuberculosis workers throughout the country should have a clear understanding of the present status of this matter.

Plans and Estimates

Equally important, however, is the need for bringing clearly and effectually to the attention of the Capital Issues Committee, first the actual building necessities in the tuberculosis field, and second, reliable figures of the cost of construction not only of temporary buildings, but of the most economical types of permanent buildings. If it can be shown, as some of the facts already at hand indicate, that such permanent structures can be erected at a cost not greatly in excess of purely temporary ones, it could then be maintained with reason that the future waste of the latter plan would not be offset by its present saving.

The National Association therefore urges all who are interested to send to the Association at once for practical use in this connection and in the booklet dealing with this subject which is now in preparation, the following material:

1—Pictures and plans of proposed buildings.

2—Estimates of cost (total and per bed) of temporary structures.

3—Estimates of cost (total and per bed) of economical permanent structures.

Letter from Committee

Under date of June 27, 1918, the following letter was received by the National Association from the Capital Issues Committee:

"Replying to your favor of the 21st inst., the Committee desires me to state that they will be glad to have submitted plans for building of tuberculosis hospitals, together with estimates referred to in your letter both for permanent and temporary structures.

"The Committee is endeavoring to secure reliable data from various sources to the end that it may be fully informed and thus be enabled to deal justly with all applicants, as well as aid the Government in its supreme effort during the War, but at the present time it does not wish to express an opinion as to type of building except to say that it believes satisfactory structures can be erected at less than \$1,000 per bed.

"The Committee desires to be helpful and to reach conclusions that may be satisfactory. It has ever avoided an arbitrary attitude, and will welcome the assistance of the National Association."

This letter shows that the way is now open to take the whole question up with the Capital Issues Committee more fully.

Note: An advance copy of the foregoing article was sent by the National Association to all state secretaries on July 3, and on July 6 copies of the circular on "Rules and Regulations," obtained from the Committee, were similarly distributed.

Sectional Conferences

This year's Sectional Conferences, under the auspices of the National Tuberculosis Association, will be held as follows: Northwestern Conference, Spokane, Wash., September 27th and 28th; Southwestern Conference, Denver, Colo., October 4th and 5th; Southern Conference, Birmingham, Ala., October 11th and 12th; North Atlantic Conference, Pittsburgh, Pa., October 17th and 18th; New England Conference, Providence, R. I., October 25th and 26th.

Suggestions in regard to topics and speakers will be appreciated, and they may be sent to the executive office of the National Association. Details as to the program and speakers will be determined upon early in August so that preliminary announcements can be made in the September BULLETIN.

Those who have been asked to serve as officers are as follows:

Northwestern Conference—President, Dr. Christen Quevli, Tacoma, Wash.; Vice-Presidents, Hon. J. F. Ailshie, Coeur d'Alene, Idaho; Dr. W. F. Cogswell, Helena, Mont.; Leslie Butler, Hood River, Ore.; Dr. T. B. Beatty, Salt Lake City, Utah; Dr. A. E. Stult, Spokane, Wash.; E. W. Stone, Cheyenne, Wyo.; Secretary, Mrs. B. B. Buchanan, Seattle, Wash.

Southwestern Conference—President, Dr. Oliver T. Hyde, Albuquerque, N. M.; Vice-Presidents, Dr. S. H. Watson, Tucson, Ariz.; Dr. R. W. Corwin, Pueblo, Colo.; Dr. S. J. Crumline, Topeka, Kan.; Dr. A. C. Shortle, Albuquerque, N. M.; Dr. Lewis J. Moorman, Oklahoma City, Okla.; W. A. Bowen, Arlington, Texas; Secretary, S. Poulterer Morris, Denver, Colo.

Southern Conference—President, Bolton Smith, Memphis, Tenn.; S. H. Oliver, Lafayette, Ala.; Mrs. Charles Schafer, Little Rock, Ark.; Harry L. Brown, St. Augustine, Fla.; Dr. T. F. Abercrombie, Atlanta, Ga.; Dr. G. Farrar Patton, New Orleans, La.; Mrs. Edmund Taylor, Greenville, Miss.; Mrs. Cuthbert Martin, Wilmington, N. C.; John P. Thomas, Jr., Columbia, S. C.; Mrs. C. D. Sullivan, Nashville, Tenn.; Secretary, Rev. George Eaves, Birmingham, Ala.

North Atlantic Conference—President, Dr. Thomas McCrae, Philadelphia, Pa.; Vice-Presidents, Dr. Harold W. Springer, Wilmington, Del.; Emile Berliner, Washington, D. C.; Dr. Allen E. Krause, Baltimore, Md.; Dr. Samuel B. English, Glen Gardner, N. J.; Dr. John H. Pryor, Buffalo, N. Y.; Dr. B. Franklin Royer, Harrisburg, Pa.; Dr. A. H. Thomas, Lynchburg, Va.; Dr. S. L. Jepson, Charleston, W. Va.; Secretary, Miss Alice E. Stewart, Pittsburgh, Pa.

New England Conference—President, Dr. Charles V. Chapin, Providence, R. I.; Vice-Presidents, Wallace S. Allis, Norwich, Conn.; Dr. L. D. Bristol, Augusta, Me.; Dr. Eugene R. Kelley, Boston, Mass.; Dr. John M. Wise, Glencliff, N. H.; William A. Vaill, Providence, R. I.; Dr. Charles S. Caverly, Rutland, Vt.; Secretary, Willis E. Chandler, Providence, R. I.

Suggestions from the Field

St. Louis Ball Game

Among the many novel methods of publicity, education and money-raising utilized by the St. Louis Tuberculosis Society, the annual baseball game is one of the liveliest. For several years the society has bought one of the big league games and featured it so effectively that, besides getting great numbers of people to talk, read and think tuberculosis, it has netted a very substantial money income (about \$10,000) to the Society.

The game is heralded by an intensive campaign of publicity through newspapers, letters, leaflets, posters and otherwise. Mercantile and manufacturing concerns of many kinds, for the sake of the advertising as well as in a spirit of co-operation, gladly contribute samples of their wares to be given as prizes to purchasers of peanuts and popcorn at the game, numbered coupons being placed in the packages. Before as well as after the game these prizes, ranging all the way from trifles up to pianos and automobiles, are exhibited in the downtown section, with music, motion pictures and much else to assist in drawing the crowd, while educational talks and distribution of literature are run in "between the acts."

This year's game, scheduled for July 21, has a new and timely patriotic setting. Instead of regular league teams, army and navy nines will provide the contest. The prowess of the military will be upheld by soldiers from a mid-western cantonment, while sailor lads from the Great Lakes Training Station will see to the honors of the navy. Before the game and at intermissions there will be a boy's Marathon, an exhibition drill and an aeroplane flight, and afterwards an "al fresco Hoover Conservation Supper," with cabaret. The women members of the board of directors will direct the supper, and a corps of matrons and girls of the fashionable set have been enlisted as general "boosters."

Team-Work in Rochester

At Rochester, N. Y., an interesting agreement of cooperation between the Bureau of Health and the Tuberculosis Committee was made last month. "It is recognized that the control of tuberculosis is now a municipal, state and federal matter," this agreement recites, "and that responsibility for carrying out actual relief work with tuberculosis patients rests with official health authorities." Acting on this responsibility the Bureau undertakes to establish a division of tuberculosis. For the present, however, this division will be in charge of the Tuberculosis Committee, which undertakes to employ a supervisor and to secure nurses "from any available sources possible until city appropriations provide for them."

Ohio Program

The Ohio society has set a good example by issuing an outline of its recently adopted program of work. The program is presented "with the concurrence and approval of the State Commission of Health" to anti-tuberculosis and public health workers throughout Ohio, in order that they may become familiar with and work for the objectives sought during the coming years. "A definite program of obtainable ends is desirable in itself; it becomes more desirable, indeed imperative, when its successful accomplishment is dependent upon the cooperation of many isolated workers scattered in various sections of the State."

Linking Up in Georgia

Announcement has just been made of the affiliation of the Raoul Foundation (Crusade against Tuberculosis in Georgia) with the Georgia State Board of Health. The principal advantages of this union are that the Board will be provided with immediate facilities for anti-tuberculosis work and the Foundation will acquire the prestige and authority that is lacking in a purely private institution. In addition there will be a saving in administrative expense and the danger of duplication of effort is avoided. A broad program, including legislative and educational work and comprehensive war activities, has been adopted by the Foundation as the Division of Tuberculosis.

Oklahoma Educates

Civic, health and social agencies throughout Oklahoma are being supplied by the Oklahoma association with a folder describing the educational services of the association. Detailed information is furnished in regard to exhibits, literature, lectures, lantern slides, moving pictures and the like. "What about your community? How much and what part of this service can you employ?" the association asks. Thus the ways in which the state association can be of practical use are brought very concretely before the various agencies in the individual communities.

Chicago Spitting Campaign

A novel anti-spitting campaign has been inaugurated by the Chicago Department of Health, according to *Popular Mechanics*. An officer is detailed to visit numerous unsanitary places and disinfect them, using for the purpose a spraying outfit labeled "Germ Killer," which is carried slung over the shoulder. On the officer's back is a placard reading: "Because you spit in violation of law the Department of Health is compelled to disinfect."

Illinois Survey Plan

A detailed outline for county tuberculosis surveys has been prepared by Dr. George T. Palmer and circulated by the Illinois association, of which he is president. The outline has eight divisions, as follows: I, Creating the Survey Organization; II, Endorsement; III, Publicity; IV, Preparatory Work; V, Field Work; VI, Clinical Work; VII, Tabulation and Interpretation; VIII, Assistance in Making Surveys. Under these divisions the procedure recommended is taken up specifically, as indicated by the following quotation from division VII:

"The technical part of a survey, upon which its success or failure often depends, is the interpretation of the findings. The State Department of Public Health maintains a Division of Surveys and Rural Hygiene to which survey material may be submitted for final review before publication. Such material, so submitted, will also be passed upon by the Division of Tuberculosis, the Division of Vital Statistics and the Division of Communicable Diseases. Survey material, for its value, depends largely upon its painstaking comparison with similar material with that of other communities. This comparison will be cheerfully made by the State Department of Public Health."

This outline, Dr. Palmer states, "will be a part of the county tuberculosis sanatorium campaign in each of the fifty Illinois counties where the sanatorium proposition is to be voted on this Fall, and will be carried out by community nurses in thirty other counties during the present year. This will guarantee a simple type of survey in at least eighty of the one hundred and two counties of Illinois. In this work we hope to utilize the women registered with the Council of Defense for war-time service."

Public Health Publicity

Three suggestive papers on public health publicity appear in the *American Journal of Public Health* for May. One is by Dr. Ira S. Wile of New York, on public schools as mediums for educational publicity. Another is by Dr. Oscar Dowling, president of the Louisiana Board of Health, on health publicity as essential to democracy. The third is by Dr. C. E. Terry and Dr. E. Schneider of the *Delinquent*, New York, on the use of the family magazine for educational publicity.

The Crusader of the Wisconsin Anti-Tuberculosis Association, for January, carries an article on the country newspaper as a factor in promoting health education. It makes the point that not only will country papers accept more educational material than the crowded city press, but that they also get closer to their readers and reach people who do not read general newspapers.

Three New Bulletins

On May 15 a new tuberculosis publication made its first appearance,—*The Illinois Arrow*, official bulletin of the Illinois Tuberculosis Association, with W. D. Thurber, Executive Secretary of the Association, as Editor. Its proposed scope is outlined in the following editorial quotation:

"It will be the constant endeavor of the Illinois Tuberculosis Association to publish in this little bulletin, articles, news items and feature stories which have point. We will eternally strive through the printed pages of this publication as well as by our other works, to hit the bull's-eye. We ask the forbearance, the cooperation and the constructive criticism of each one of our readers and co-workers. Help us to make *THE ARROW* one of the liveliest, snappiest, newsiest and most helpful of the many little magazines in the tuberculosis field."

The first number contains 40 pages and covers a wide range of subjects. It is to be issued monthly.

Another newcomer among local tuberculosis papers is *The Bulletin* of the Minneapolis Committee. The first issue is illustrated and got up in popular form.

The Tennessee association is now issuing a quarterly *Bulletin*.

Cincinnati Booklet

With the purpose of acquainting householders and particularly occupants of tenement houses with the requirements of the housing code of Cincinnati and incidentally giving them a variety of good advice, the city authorities have prepared for distribution an illustrated pamphlet called "Home, Health and Happiness." The booklet is attractively printed and so freely illustrated that he who runs may get the point even though he does not stop to read. "Ten Hints for House Hunters," "What a Can of Paint Will Do," "Concerning Curtains and Carpets"—these are some of the hints briefly paraphrased.

From Grand Rapids

Progress during the past along an important but generally neglected line is reported by the Grand Rapids society. A traveling dental clinic was organized for rural school children, and so quickly demonstrated its usefulness that the county supervisors have promised it will next year be supported by public funds.

New York Poster Exhibit

The *JOURNAL OF THE OUTDOOR LIFE* for July publishes an article by Frank H. Mann, secretary of the New York City tuberculosis committee, on the Trudeau poster contest recently held in New York and Brooklyn, in cooperation with the art departments of the high schools. One of the two final prize posters is used as a frontispiece and the other, together with eight of those winning in individual schools, are reproduced to illustrate the account.

Workers in other parts of the country will find this story worth reading for its publicity suggestions.

The Institute

Thirty tuberculosis workers, representing sixteen states and Canada, attended this year's Institute held at New York, June 10—29. The attendance included four executive secretaries of state associations, three state field secretaries, four local secretaries, a number of assistant workers, and some about to take up tuberculosis activities. Applications for admission were so numerous that seventy-five or more could have been enrolled had facilities permitted. As in previous years the Institute was conducted at the New York School of Philanthropy by Mr. Jacobs, of the National Association, and a corps of speakers on special subjects.

The question of holding two Institute courses next year, in view of the demand, is now under consideration.

Film Possibilities

For the possibilities of the motion picture and stereopticon, *BULLETIN* readers are referred to *Reel and Slide*, a magazine devoted to this subject. One section describes educational films. Quotation is made of the following excerpt from a report of the U. S. Department of Education:

"Within the next decade the Moving Picture will be the indispensable adjunct of every teacher and educational lecturer. On the public platform the cinematograph will inevitably have its recognized place, and it may even invade the pulpit. As the attention and interest of educators are more and more drawn to its merits, the future usefulness of the educational cinematograph bids fair to surpass the predictions of its most sanguine advocates."

Open Air Schools

The National Association has turned over its directory of open-air schools and fresh-air classes to the Elizabeth McCormick Memorial Fund. All information in regard to new undertakings along the line of open-air schools should be sent to Mrs. Ira Couch Wood, director of the fund, 315 Plymouth Court, Chicago.

Paragraph Jottings

The American Public Health Association will hold its next meeting in Chicago, October 14 to 17. The central theme of the meeting will be: "The Health of the Civil Population in War Times."

Dr. Hermann N. Biggs, of New York, has been elected Chairman of the Section on Health of the National Conference of Social Work.

At the convention of the American Association of Graduate Nurses in May a resolution was adopted urging all nurses training schools to include specific training for tuberculosis nursing.

Red Cross Seal Supplies

The principal Red Cross seal supplies are now being printed. The 600,000,000 seals are being printed in two plants, one in an Atlantic state and the other in a Middle Atlantic state. It is believed that this arrangement will expedite shipments and transportation. It should be realized by all that orders for seal supplies must be sent in by state and local agents this year far earlier than ever before, on account of the limitations in transportation, whether by freight, express or parcels post.

An innovation in the free supplies is a poster in colors, of which 500,000, size 20 by 30 inches, will be printed. These will be suitable for use similar to that of the Liberty Loan and Red Cross War Fund posters, in windows and on walls. If the printers, who are reputed to be among the best in the country, do justice to the artist's painting, the Red Cross seal poster will be one of the most beautiful, if not the most beautiful poster yet produced in America during the war. It will depict a Red Cross nurse standing in appeal beside a colossus of Liberty. The artist is the same as for the 1918 seal, Mr. C. A. Winter. The posters will be distributed in quantities based on the number of seals sold in each state in 1917. This will also be the basis of allotment for the other seal supplies furnished by the American Red Cross.

Over a million more Red Cross seal envelopes are being printed this year than ever before. While they will be of the same general style and shape, the printed matter has been revised. For use by children a supply of these envelopes will have a Modern Health Crusader shield printed on them and so will be helpful in stimulating interest in that movement.

The "For Sale" cards will be printed in somewhat larger number than hitherto, while separate wreath cards will be omitted. The "For Sale" cards, however, may be made wreath cards by having the legend "For Sale Here" trimmed from the bottom.

Five million four-page circulars will be furnished this year. Like the "Happy Postman" circular of last year, they will be of the right dimension to be enclosed in mail sale letters. The first page of this circular will carry a striking drawing in colors (see last page of *BULLETIN*) by Louis Fancher, an artist of national repute. Mr. Fancher, who contributes his services, is a member of the Bureau of Pictorial Publicity of the U. S. Committee on Public Information, and is one of a group of well-known artists who have been serving in the Red Cross and Liberty Loan propaganda.

Each state association is allowed to substitute its own copy for all or part of the standard copy given on the proof sheets for pages 2, 3 and 4. Eighty changes may be had free of charge, which admits special copy for more than 30 local associations.

The Annual Meeting The Framingham Demonstration

By Mary A. Abel, Educational Assistant

A brief general summary of the annual meeting of the National Association, held in Boston June 6-8, appears in the JOURNAL OF THE OUTDOOR LIFE for July. A list of the new officers and directors was printed in last month's BULLETIN. Some of the papers will be printed in full or abridged in the JOURNAL, the AMERICAN REVIEW OF TUBERCULOSIS, and other medical publications, and reproduced entire in the volume of Transactions, which this year, as heretofore, will be sent to members *on request*, and supplied to non-members at a charge of \$1.00.

Of special interest to tuberculosis workers is a resolution which was adopted with reference to new hospital and sanatorium construction during the war. (See "War-Time Building," page 3.)

Another resolution, occasioned by the rumor that Surgeon-General Gorgas might be retired under the age provision, deplored such retirement "from the office he now fills so admirably," and expressed the hope that he would be "continued in active service in his present position, so that neither his work nor his plans may be interrupted." A third resolution commended the Army Medical Museum at Washington for its steps to preserve the "valuable experience being gained at the present time in war medicine and surgery," and to make itself "a centre for medical teaching and research," and pledged support to the directors of the Museum "in their efforts to secure appropriations from Congress and in other ways."

Attendance by States

The registered attendance at the annual meeting, distributed by states, was as follows:

State	Members	Non-Members	Total
Massachusetts	48	201	249
New York	44	23	67
Connecticut	14	9	23
New Jersey	16	7	23
Michigan	11	6	17
Rhode Island	7	9	16
Illinois	14	1	15
Pennsylvania	7	7	14
Ohio	11	2	13
Canada	10	1	11
Maine	3	8	11
Minnesota	6	1	7
Indiana	7	..	7
New Hampshire	3	4	7
North Carolina	4	2	6
Wisconsin	5	1	6
Colorado	3	2	5
California	3	1	4
District of Columbia	2	2	4
Maryland	2	2	4
Tennessee	3	1	4
Texas	3	1	4
Vermont	2	2	4
Virginia	4	..	4
Missouri	..	3	3
New Mexico	2	1	3
Arizona	2	..	2
Iowa	1	1	2
Montana	1	1	2
Washington	1	1	2
Alabama	1	..	1
Arkansas	1	..	1
Delaware	..	1	1
Georgia	1	..	1
Idaho	..	1	1
Kentucky	1	..	1
Louisiana	1	..	1
Nebraska	1	..	1
Oklahoma	1	..	1
Total	246	302	548

Henceforth each number of the BULLETIN will contain a column or more reporting current progress in the Framingham Community Health and Tuberculosis Demonstration. The Demonstration was begun in December, 1917. The purpose in view, as well as the executive direction and the financial support, are referred to below.

A report of the progress of the Framingham Community Health and Tuberculosis Demonstration promises to be of value at this time, in view of the emphasis which the war is placing upon the need for human conservation, and the heavy burdens which the war will throw upon communities everywhere. The necessity for meeting adequately community health obligations is greater than ever before. Of interest in tuberculosis work in particular, it is felt that perhaps the indications of the Framingham experience in its bearing on community health machinery and problems of disease prevention may also have a wider significance.

The Framingham Community Health and Tuberculosis Demonstration is being conducted by the National Tuberculosis Association under the supervision of a special committee. On this committee are represented the National Association, the Massachusetts State Department of Health, the United States Public Health Service, also private anti-tuberculosis organizations in Massachusetts, Connecticut, New York, and Pennsylvania, Framingham official and private health agencies, and the Metropolitan Life Insurance Company, the donor of the fund of \$100,000 to be devoted to the work.

The Objective

The object of the investigation, then, is to demonstrate what may be possible with united community action in the problem of prevention and control of tuberculosis. Inevitably, the experiment, if it goes forward as planned, will broaden out into a general health demonstration concerning itself with many of the various disease-prevention problems, at least in so far as allied interests can be stimulated to function along channels which diverge from the chief line of attack upon tuberculosis, but which vitally affect the general morbidity and mortality rates. In the attack, all of the several age groups must be considered, and many potential agencies must be utilized—social, industrial, educational, and medical.

The selection of Framingham was made after several months' study. The town has a population of approximately 16,000 people and is situated in eastern Massachusetts, twenty-one miles from Boston. It recommended itself to the

committee as an average community, with mixed industries, varied racial groups, a good local health organization, linked with an excellent State Department of Health, a normal amount of disease, particularly tuberculosis, well trained physicians, good hospitals, and a sufficient promise of cooperation from medical, industrial, commercial and social organizations to give reasonable assurance of success.

Essential Features

The essentials of the Demonstration, as outlined by the committee, are as follows:

1. The sympathetic cooperation of individuals and organizations, public and private, in Framingham, and the carrying out of the work as Framingham's plan.

2. The execution of the program on an educational and democratic basis, social machinery (neighborhood committees, etc.) being devised to carry the various elements in the community along with the work as it progresses.

3. The utilization of expert advisory service whenever feasible. This principle applies, of course, to general sanitary, medical, nursing, educational, school, or industrial problems.

4. The encouragement of the community to meet its own health obligations during the period of the Demonstration, and to provide for the perpetuation of routine non-experimental activities subsequent to the close of the experimental period.

5. The concentration on tuberculosis as the major interest of the Demonstration, with a following out of other lines for disease prevention when feasible, whether directly or indirectly related to the major consideration.

6. The working out of the Demonstration at a minimum cost.

7. The designing and development of the program as a war measure, to meet the emergencies in the health field as emphasized in the present international crisis.

General Significance

The Framingham Community Health and Tuberculosis Demonstration aims to be not only an investigation and an experiment in community disease control; it should be also a demonstration of a community method, successful or not, as events prove, of disease prevention and health administration. The latter aspect especially will be of wide interest.

An accurate presentation of the findings of this social laboratory as they appear is therefore of value. It may be that the "results" of the Framingham Experiment will be more important than the result." In any event, knowledge of the progress of the work may stimulate similar studies elsewhere.

Health Story Contest

The National Tuberculosis Association invites anti-tuberculosis workers and others interested in health work to write story talks for children, from which may be chosen those to be read by school children on Modern Health Crusade Day in Tuberculosis Week, December 1-7.

Two separate stories are desired. One should be adapted to younger children from about 6 to 10 years of age, and the other to older children from about 11 to 15 years. A prize of \$5 is offered for the story adjudged to be best in each of these two age classes.

The stories will be printed as circulars and supplied through the state tuberculosis associations to school teachers over the country. The name of the author will be printed at the head of each story, and will be prominently published in the JOURNAL OF THE OUTDOOR LIFE or the monthly BULLETIN of the National Association.

The names of the authors of the second best story in each case will likewise be published and their stories will be printed in the JOURNAL or the BULLETIN. Nearly 200,000 copies of "Serving Uncle Sam," the prize story of last year, written by Mrs. Louise F. Brand, of the Wisconsin Anti-Tuberculosis Association, were distributed to teachers scattered throughout the United States, and this health message was doubtless read to two million children.

The stories should relate to tuberculosis, hygiene and Red Cross Christmas seals. They should be written to stimulate children's interest in personal and community health, the Modern Health Crusade, and in the sale or purchase of seals. It is suggested that the relation of health work to ultimate victory in the war be touched upon. Information regarding the seal campaign and the Modern Health Crusade will be furnished on request. A sample of the story used last year, which was adapted to children of the younger period, will also be supplied. No story should contain over 1,800 words.

The committee on awards will be composed of not less than three persons familiar with the requirements of a story intended to interest and instruct children. Manuscripts must be submitted to the National Association not later than August 25. Authors desiring the return of their manuscripts should send postage.

Authoritative Books

A new edition of circular "Authoritative Books on Tuberculosis," brought up to date by the inclusion of several books published during the past year, has just been issued by the JOURNAL OF THE OUTDOOR LIFE. While designed largely to meet the needs of physicians, this list includes a number of books which are not too technical to be of great value to the layman. Copies of the circular may be obtained free from the JOURNAL, 381 Fourth Avenue, New York.



Modern Health Crusaders' Department

The August meeting for leagues is the most informal of the year. It should be staged as an outing or picnic. Whatever day in August (or in July) serves the convenience of most members should be chosen. The subjects listed for this meeting in the manual are: "Field athletics and organized play; first aid to the injured; drills." Whatever smacks of military drill interests children these days. Two excellent and sufficiently simple drill manuals may be secured from the Boy Scouts of America, 200 Fifth Avenue. The first is the Pirie MacDonald manual, and the second is the one published by James Brown & Sons.*

The Playground and Recreation Association of America, 1 Madison Avenue, New York, invites correspondence with league masters and organizers. Its pamphlets, "Athletic Badge Test for Boys" and "Athletic Badge Test for Girls," explain useful tests of athletic fitness and illustrate the handsome medals supplied by the association. These pamphlets and a list of other publications will be sent free.

The American Red Cross handbooks, "First Aid General" and "First Aid for Women," may each be obtained from Washington or through local chapters.* They must be interpreted for children by an adult leader. D. Appleton & Company publishes a book, "First Aid for Boys," and Dr. Eldridge Eliason's "First Aid in Emergencies" (Lippincott) is written in simple language.*

The American Red Cross has now officially endorsed the Modern Health Crusade. Mr. H. D. Gibson, general manager of the Red Cross, has written to the managers of the fourteen divisions, including the foreign division, bespeaking their cooperation in the development of the Crusade. To quote from Mr. Gibson's letter: "Dr. MacCracken, representing the Junior Membership, gives his approval to these activities as in every way useful for the schools, and I therefore take pleasure in endorsing the program of the Health Crusaders as giving an interesting and useful field for patriotic service of the school children and the promotion of national welfare. Teachers who wish to prepare for the coming school year by acquainting themselves with this movement will be able to obtain information from the division directors of the Junior Red Cross. The American Red Cross commends the sale of the Red Cross seals as a useful activity after Thanksgiving next fall for the Junior members."

Notes and Pointers

Mrs. Anna Krieger, principal of the Brandeis School of Louisville, reports: "Here in Louisville we are fast becoming Modern Health Crusaders. The health chore cards were given to the children of the Brandeis School and they are most diligent in performing the chores, many of them reaching the maximum. Throughout the school there are only two who have failed to make the necessary forty chores, and we find that the parents are entering into the plan with hearty cooperation. One little girl in the third grade was heard to say that

she had forgotten to take her glass of water before meals, when her little friend responded that her mother helped her by having the glass of water by her plate at every meal. One little boy in the third grade told me that his mother had promised

that after May 15 he could take a daily bath. A boy in the sixth grade could not check up his ten hours of sleep, but had fallen into line at the end of the second week.

"The Louisville Normal School is about to introduce the Crusade among the practice children.

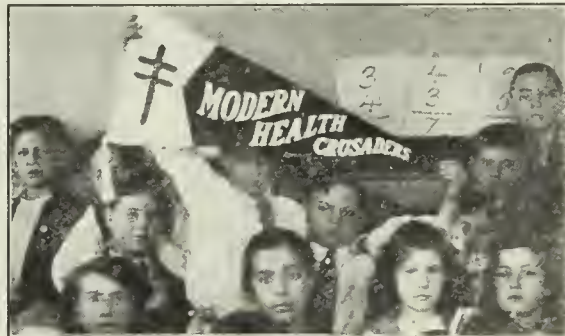
"Why should we not use the laws of habit formation along health lines, thereby laying the foundation for our future happiness and success?"

Miss M. Grace Osborne has been appointed state director of Modern Health Crusaders for Illinois. As far back as May 15 more than 25,000 children had been recruited as Crusaders in Illinois, representing twenty communities.

Local committees of the Council of National Defense, War Savings Committees and similar organizations are forming Modern Health Crusader leagues, recognizing that the saving of health is a branch of national conservation no less important than financial thrift. Public health nurses employed in extra-cantonment zones under the U. S. Public Health Service are introducing the Crusade among the children in their districts.

Orders for Modern Health Crusader supplies have been received not only from Canada and France but from Cuba, China and Korea. Missionaries and Y. M. C. A. workers are convinced that Crusader methods are right for teaching hygiene in the Orient.

* Apply to the publishers (distributors) or to the National Association for price. Regulations for second class mail forbid quotations except on our own publications.



Emergency Public Health Nursing

One of the most puzzling problems that the war has created is how to meet the demand for nurses in public health work. At the meeting of the National Organization for Public Health Nursing held in May at Cleveland, this question was given careful consideration and the following resolution was adopted:

"Whereas the tremendous call for nurses for foreign and cantonment service is increasingly causing a shortage of nurses at home;

"Be it resolved, that all available and suitable assistants be used to supplement the work of public health nurses as follows: (This to be done through existing public health organizations rather than by the formation of new organizations.)

As an amplification of this resolution the Executive Committee of the National Organization for Public Health Nursing has worked out a code for aid and attendant service, by means of which partially trained and untrained workers may render such service in the public health nursing field.

Those included under the code are grouped into four classes as follows:

1. Part time graduate nurses; usually nurses who are married, who have other family responsibilities, or who are physically incapacitated for full time. Such nurses, if otherwise eligible, would be used as staff nurses, but on part time.

2. Partially trained nurses, i. e., graduates of specialized or very small hospitals or those who for acceptable reasons are not completing their training.

3. Attendants, i. e., practical nurses, who may or may not have had special training as attendants.

4. Nurse Aids, i. e., unpaid volunteers who may or may not have had the Red Cross Home Nursing Course with or without the 72 hours hospital work.

It is obvious that for the use of the first group no special conditions are necessary except that the time of service be regulated to suit the convenience of employer and employee.

With regard to the other three types of assistance, however, there are two essential requirements, as follows:

1. The selection and supervision shall be made by a public health nurse who will be professionally responsible for every patient.

While He Fights Over There



Protect His Family & Workers Behind Him Back Here

Cover design for 4-page leaflet, "Over There and Back Here," to be issued for the 1918 sale of Red Cross Christmas Seals

2. Every assistant must agree to conform to the rules and regulations of the association under which she is working.

The supervision indicated in the first of these requirements should include the following steps:

1. Limited instruction in
 - (a) Policy of Association.
 - (b) Approach of family.
 - (c) Duties.

(d) Points to be observed and reported to supervisor.

2. Practical supervision to include

(a) Initial visit to the patient with a graduate nurse of the staff.

(b) Discussion as to the type of assistant to be used; actual work to be done and fee to be charged to be determined by staff nurse.

(c) Continued supervising visits to be made to all patients; no case to be discharged except by the supervisor.

(d) A suitable working dress to be worn by each type of assistant.

The following suggested detailed plan for the use of each of these types of nurses will also prove helpful: .

1. Partially trained to be used in cases where only the simple forms of nursing procedure are necessary.

2. Attendants to be used as household workers as long as needed in the homes of the patients; the continuation of such service, with the visit of a visiting nurse for the professional work, might be a substitute for a private nurse.

3. Aids to be dependent upon personal qualifications; used for errands, clerical work, supplies, friendly visits, social service, assisting the nurse at clinics and—with the exceptional person—helping the nurse with the simpler forms of bedside nursing.

Anti-tuberculosis workers will be able to utilize this plan in almost any community. For further information and details they are referred to the National Organization for Public Health Nursing, 156 Fifth Avenue, New York City.

Children's Year

In a number of states and cities tuberculosis workers are taking a very active part in the Children's Year drive, not only as regards their specific line of interest but in

the general direction of the enterprise. The National Association would be glad to hear from such societies as are co-operating or intending to cooperate in this undertaking.

This drive presents an excellent opportunity for tuberculosis forces throughout the country to assist the Children's Bureau in giving adequate emphasis to tuberculosis as a children's health problem.

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BULLETIN

OF THE

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National Tuberculosis Association

Vol. IV

AUGUST, 1918

No. 11

Red Cross Seal Plans To Be Announced

As the BULLETIN goes to press it is still too early to make definite announcement with regard to plans for the Red Cross seal campaign for 1918. As most anti-tuberculosis workers, however, have already heard, there is a likelihood that a radical change in the methods of the Christmas campaign will have to be adopted. Negotiations have been in progress for

nearly three weeks with the officials of the American Red Cross with a view to arriving at a satisfactory basis of cooperation. As soon as a definite announcement with regard to the plan to be adopted can be made, letters of advice will be forwarded at once to state agents. Detailed announcement will also be made in the Sep-

tember issue of the BULLETIN which will be issued somewhat earlier in the month than usual. Meanwhile anti-tuberculosis workers are advised to hold in abeyance any plans for the development of the 1918 Christmas seal campaign until a definite announcement as to policy can be issued from the national office.

The Vocational Rehabilitation Act

Of broad interest to tuberculosis workers throughout the country, in connection especially with the problem of soldiers and sailors discharged on account of tuberculosis, is the Smith-Sears Vocational Rehabilitation Act (Senate bill No. 4557) which was signed by the President and became a law on June 27.

Though space will not permit reprinting the bill in full here, the following summary gives its main provisions:

Section 1. The act applies only to "disabled persons discharged from the military or naval forces of the United States."

Section 2. Disability is defined as any condition which, in the opinion of the Federal Board of Vocational Education, renders a man unable to enter or continue a gainful occupation. Such men shall be provided by the Board, if possible, with such a course of vocational rehabilitation as it may prescribe. While taking such a course, these men shall be paid each month an amount equal to their last month's pay when in service, or equal to the war risk insurance to which they would be entitled, if the latter amount is larger. In the case of men who were enlisted at the time of their discharge the family shall receive a compulsory allotment and an allowance from the War Risk Insurance Bureau on the same basis as though the men were still in service. When, however, a man either fails or refuses to

follow the course satisfactorily to the Board, part or all of the monthly compensation due him may be withheld. Vocational training is not to begin in any case until the army or navy medical authorities certify that the patient is in suitable condition for it.

Section 3. As far as practicable, such vocational rehabilitation shall be made available without cost to men entitled to war risk insurance who may not be completely disabled.

Section 4. The Board is given all necessary administrative powers to make this rehabilitation effective, including the placing of men in suitable occupations when the course is completed—with authority to utilize for this purpose the employment facilities of the Department of Labor.

Section 5. The Board shall make pertinent studies and reports, and may enter into such cooperation with other agencies as it deems advisable.

Section 6. All treatment of men prior to their discharge shall be under the control of the War Department and Navy Department respectively, but any mutually helpful coordination between these departments and the Board may be established by mutual agreement. The Board shall cooperate with these departments "insofar as may be necessary to effect a continuous process of vocational training."

Section 7. The Board is authorized

to receive unconditioned donations, in addition to the federal appropriations for this work.

Section 8. \$2,000,000 is appropriated by Congress, and its general distribution specified.

Section 9. The Board shall make a quarterly financial statement and an annual report.

Sections 10 and 11. Legislative details not necessary to summarize.

It will be noted that the act makes no reference to disability especially on account of tuberculosis or other specific cause. It applies, however, to disability through any cause. The general discussion regarding this measure has been concerned, it is true, with disability resulting from wounds or shell-shock, but perhaps when the work gets under way it may be found that disability from tuberculosis and other disease presents an equally serious and even more difficult question. Tuberculosis workers would do well to see that their particular problem of rehabilitation is kept sufficiently before the attention of the Board, and to tender their cooperation in working that problem out successfully.

The full text of the act is printed in *The Vocational Summary* for July (Vol. I, No. 3), published by the Federal Board. Subscription to this publication may apparently be had free on request.

BULLETIN OF THE

National Tuberculosis Association

Published Monthly

In the Interest of Workers Engaged in the
Anti-Tuberculosis Movement by the

National Tuberculosis Association

381 FOURTH AVENUE NEW YORK CITY

Vol. IV August, 1918 No. 11

Entered as Second Class mail matter, October
21, 1914, at the Postoffice at New York, N. Y.,
under the Act of August 24, 1912

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Hold the Home Lines

That it is the better part of patriotism for many anti-tuberculosis workers and nurses to stay in their present positions rather than to go into foreign or into other government service is the impression one may draw from the following resolution adopted by the executive committee of the National Tuberculosis Association at a meeting on July 13:

"Resolved, That the National Tuberculosis Association is strongly opposed to the loss by draft of men who occupy valuable and essential positions in tuberculosis work; the executive office is instructed to secure information as to the drafting of such men and to do everything possible to secure their exemption."

Following out the resolution, the National Association has corresponded with the heads of all anti-tuberculosis associations in the following letter:

"Among the problems by which tuberculosis workers throughout the country are confronted on account of the war, there is one which concerns the efficiency and in some cases the very maintenance of anti-tuberculosis activities in the community at large. This is the problem presented by the continued withdrawal of executive officers either to

take up new war work, largely in Europe, or to enter the army or navy, by draft or enlistment.

"These inroads have already been serious. By all means let organizations and individuals employed in combating tuberculosis be second to none in answering their country's call to service! But we must also face squarely the question of whether in the end some workers cannot render the most effective service by sticking to their present posts. With at least a million people afflicted with this disease in the United States, an annual death toll exceeding 150,000, and the additional problem of providing for the thousands of men rejected in the draft or discharged from the army and navy as tuberculous, any relaxation of the tuberculosis campaign will be very costly to the nation in terms of human waste.

"The National Association urges, therefore, that in the case of executives or officers whose relation to tuberculosis work is vital, earnest and thorough consideration be given to the question which the present letter raises."

The call for service with the Red Cross, the Rockefeller Commission, or the Army is bound to come to all of those who are making a success at the present time in tuberculosis work. The two questions that will confront one at such a time are, first of all, "Can I do more work where I am than I could do in some new field; and secondly, can some one else take up my work if I leave it?" It is no doubt the popular thing to join the Red Cross and to go to France or to Italy, but it is sometimes much more patriotic to stay at home even in the face of criticism.

Which is the better patriotism in any individual instance, only the man or woman who is called upon can finally decide.

Sectional Conferences Shaping Up

Detailed programs are now being worked out for the six sectional tuberculosis conferences to be held in September and October. Suggestions regarding speakers, however, will still be welcomed. Those who plan to attend should make note of times and places as follows: Spokane, Wash., September 27 and 28; St. Louis, October 2-4; Denver, October 4 and 5; Birmingham, Ala., October 11 and 12; Pittsburgh, October 17 and 18; Providence, R. I., October 25 and 26.

The change in the time and place of the Mississippi Valley Conference, of which Paul L. Benjamin, Associated Charities, Minneapolis, Minn., is now secretary, should be especially noted. The personnel of the Central Council in charge of this conference is otherwise as given in the May BULLETIN.

The programs of the other five conferences, held under the auspices of the National Association, will in general be limited to the discussion of the health education of the soldier and civilian

population in war-time and the care of soldiers and their families now and after the war. It is probable that under the general head of "Health Education" most of the conferences will discuss publicity, exhibits, lectures, printed literature and the Modern Health Crusade.

In connection with the consideration of adequate tuberculosis programs in war time, the conference will take up the questions of organization, hospitals, clinics, nurses, open-air schools, and industrial conservation, and other parts of a complete community program. "The Diagnosis of Tuberculosis in War Time" will be dealt with at the medical sessions.

The Red Cross will be asked to cooperate, especially in the presentation of the subject, "Adequate Care of the Tuberculous Soldier." Under this heading there will be talks on federal hospital provision, vocational training and reinstatement into civilian life. It is planned to have a session on "Public Health Nursing" at each conference.

Each program will also have additional features of special interest to the particular conference district. The Southern Conference, for example, will discuss the Negro problem, and the Southwestern Conference the problem of the indigent migratory consumptive. Preceding each of the five conferences, the executive secretaries of the state associations and some others (attendance by invitation) will meet for a one-day institute on programs and methods of state work. All anti-tuberculosis workers will be welcome at the public conferences.

Enclosure slips suitable for use in letters are now being prepared. Those who would like to help advertise any of the conferences may obtain a supply of these slips upon application to their state association or to the National Association. Preliminary announcements, giving program details and other information, will be ready about September 1. The National Association will be glad to mail these announcements to any addresses sent to the executive office. It is expected that the detailed programs will be printed in the September BULLETIN.

Dr. Hatfield Managing Director

At the meeting of the Executive Committee of the National Tuberculosis Association held at Saranac Lake on July 13, the title of Dr. Charles J. Hatfield, who has been serving for the last four years as Executive Secretary of the Association since the resignation of Dr. Livingston Farrand, was changed to one more expressive of his duties, namely, *Managing Director*. Dr. Hatfield will devote more time to the work of the National Association. Mr. Jacobs will continue in his present capacity as will the other members of the staff. The executive committee is considering certain plans for the expansion of the work of the Association which will be taken up at its next meeting to be held at Buffalo, on August 17.

Cleveland's "Baby-Saving Special"

To take health to the very door of the home the Cleveland Children's Year Committee is operating a traveling dispensary which is in reality a three-room child hygiene clinic. Mounted on a standard army ambulance chassis, this "Baby Saving Special" makes daily trips, on schedule, to the eight health districts into which the city has been divided.

The interior of the motor truck proper is equipped as a model child hygiene dispensary, with examining table, scales, measuring rods and other facilities. Attached to each side of the truck are large folding tents which, when in position, furnish a waiting room for mothers and babies, as well as an exhibit and lecture room. On the roof of the car a folding motion picture screen and portable projection machine afford opportunity for the showing of health films to drive home the lessons of the physician and nurse in charge of the car.

The car is driven in turn by the women members of a volunteer Children's Year motor corps. Each driver is uniformed in khaki. To assist in

handling the crews a uniformed sanitary patrolman also is carried on the car.

Mothers whose babies are found to be in need of medical treatment are immediately referred to the Babies Dispensary and Hospital for free treatment, or to physicians in their own neighborhood

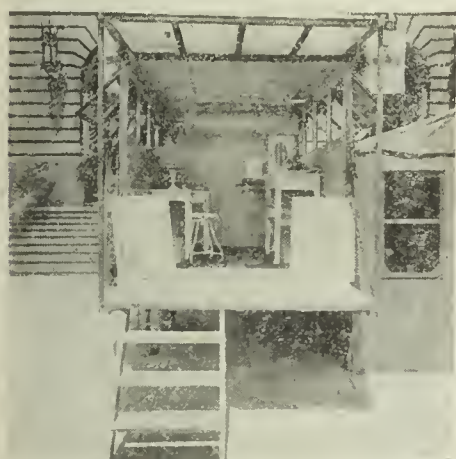
the curability of tuberculosis, is also used. A physician explains each picture and answers questions. By a new device the reel may be stopped and any picture held as long as desired.

In some 100 operating hours since the car recently went into service 381 babies have been examined, and 3,200 mothers, fathers and older children have received instruction in child care.

Cleveland claims the distinction of being the first city in the country to utilize an automobile dispensary for child hygiene work. This dispensary was made possible through the interest of Mr. and Mrs. A. S. Chisholm of Cleveland, who presented the car to the Children's Year Committee, of which Mr. Chisholm is chairman. The idea of such a travelling dispensary was suggested by the dental car designed by Dr. S. Marshall Weaver of Cleveland, and now in use in the army. Dr. R. H. Bishop, Jr., Cleveland's Commissioner of Health, and J. D. Halliday, chief of the bureau of health education, adapted this idea to the city's Children's Year campaign.



On the roof of the traveling dispensary a folding screen and portable motion picture machine afford health lessons in pictures



The interior of the traveling dispensary is perfectly equipped for prophylactic child hygiene work

who are known to be competent, if they can afford to pay for service. The mothers of well babies are referred to the nearest of the city's prophylactic dispensaries for regular instruction in "how to keep well."

Most of the motion pictures used were worked up by Dr. Richard A. Bolt, chief of the bureau of child hygiene of the division of health. A set of films entitled "Six Ways to Save a Baby" portrays vividly right and wrong ways of giving a bath, virtues of a home-made ice-box, proper clothing, different methods of weighing, how to modify milk, prevention of infection, and the importance of birth registration. The National Tuberculosis Association's film on "The Great Truth," dealing with



In crowded slum sections mothers with their babies crowd about the dispensary as soon as it comes to a stop

More About Children's Year

In the BULLETIN for July appeared a brief note with reference to the Children's Year drive of the Federal Children's Bureau, in which it was stated that the National Association would be glad to hear from tuberculosis agencies which are cooperating in that undertaking. Below is presented briefly information which has since come to hand, either directly or indirectly, from a number of localities.

In Three Cities

The vigorous manner in which Cleveland is getting into the child-saving campaign is described elsewhere in the present issue. The Anti-Tuberculosis League is actively cooperating in the enterprise.

Minneapolis has organized a city-wide

children's year committee, with which the tuberculosis association is closely affiliated. Special prominence is being given to an extensive child welfare exhibit.

The first weighing station in Baltimore was opened by the Maryland association, which is also providing automobiles to carry the mothers and children to and from the clinic.

State Associations Act

In Tennessee, the association is working out with the parents' and teachers' societies a program of cooperation with the federal bureau.

In Utah the secretary of the association has been appointed secretary of the state child welfare committee and is now giving practically his whole time to the drive.

The Wisconsin association has gone into the enterprise vigorously. On the basis of the deaths of young children

during the past five years, it has made up a quota of babies to be saved in each county during the coming year. The allotment for the state as a whole is 2,410.

Arizona Organized

Early last spring the Arizona association took up the drive actively in that state. The executive secretary makes the preliminary local arrangements—that is, giving detailed information on clinic material needed, equipment, specialists and the like. She goes to each locality for at least the opening day of the clinic, and sees to it that everything is in readiness. In addition to weighing and measuring, the babies are given a thorough examination. A specialist on children has been secured for all the clinics held thus far, his services being donated to the cause. Clinics have been held in Tucson, Phoenix, Globe and Prescott, and others are soon to be organized.

Suggestions from the Field

This department of the BULLETIN is designed to give brief information regarding anti-tuberculosis activities in different parts of the country. The items published are presumed to deal with new lines of work or new methods and to contain suggestions of general value. Tuberculosis workers are invited to send appropriate information to John Daniels, Publicity Secretary.

Exchange Service

The response to the proposed exchange service of the National Association, as outlined in the BULLETIN for June, has been very favorable. As previously stated this service is to be limited, at first, to state associations, except in the case of a few local societies which have taken a special interest in it. To date, written replies to our recent circular letter have been received from a majority of the state secretaries, recording their desire to take part in the exchange, while others have expressed themselves to the same effect verbally. The letters received have contained much information regarding the activities of the respective associations. A good deal of printed material in the form of bulletins, reports and leaflets, has also come to hand. This collection shows a general similarity but also some interesting differences and local characteristics as regards the publicity of the different associations.

The present number of the BULLETIN is made up very largely of the current information thus obtained from many parts of the country. It is hoped that each locality may find these items not only of interest but also of practical value in the promotion of its own work. Further information on any subject noted may be secured either through the exchange, or by communicating direct with the agency in question.

State secretaries who have not yet replied to our letter are advised to do so as soon as convenient, if interested, in order that the exchange service may be put into operation throughout the country. The fuller the information and material supplied, the better.

Directory Changes

From time to time the BULLETIN has published lists of state secretaries, revised to date. Henceforth, acting upon a suggestion made by James A. Minnick of Chicago, changes in secretaryships will be reported currently in each BULLETIN, for the information of state and local organizations. Limits of space will make it necessary to confine such notices in the BULLETIN to secretaryships of states and large cities, but similar information regarding any locality will be supplied by letter, on request addressed to the Directory of the National Association.

Following are changes which have occurred since the list was published in the May BULLETIN:

Maryland, no executive secretary at present; office secretary, Miss M. B. Hokamp.

Minnesota, Dr. H. W. Hill, executive secretary; Dr. I. J. Murphy, assistant secretary.

South Carolina, Miss Chauncey Blackburn, executive secretary.

Rhode Island Brevity

For brevity and novelty of form, the annual report of the Rhode Island Association, recently issued, is to be commended. It consists of a sheet about 9 by 14 inches in size, folded to make 8 pages, opening telescope fashion. First comes a nut-shell summary of the year's work, then a directory of all tuberculosis agencies in the state, a list of the association's officers and members, and the treasurer's report. Pictures, however, are lacking. A few good ones, substituted for the membership roll, would add to the report's general appeal.

Alabama Saves

The Jefferson County, Ala., association is combining thrift and altruism in its local campaign, through the collection of tin-foil by school children. Since last November nearly \$1,500 has been realized in this way. Half of this money goes to support an open-air school. The other half, in a spirit of international altruism, is given to the American committee on Armenian and Syrian relief, for use in saving the lives of orphaned children in those harassed lands.

How to Get Sanatoria

Workers interested in getting county sanatoria will find valuable suggestions as to how to conduct any necessary local campaigns in an outline drawn up by the Illinois association for use in that state. It is entitled "Outline of a Program for Conducting a Campaign for a County Tuberculosis Sanatorium by Referendum under the Illinois Law." Though it applies specifically to that state, its general features are capable of application elsewhere, and will serve for states and districts as well as for counties.

Vermont Items

The Vermont association will henceforth supply sputum cups upon application to anyone who is tuberculous. These cups will be provided free to those who cannot afford to pay anything and to others at a nominal charge. They are supplied automatically to all persons examined at the state department of health whose sputum is positive. The cups are made of oiled paper with close fitting cases, and are to be burned after use for one day.

The association is also engaged in a campaign to raise funds through the sale of shares in the organization. These shares are to be sold for \$1.00 each, and the dividends paid in "conscientious work." Window display advertising is being used to push their sale.

Philadelphia Publicity

The Philadelphia committee of the Pennsylvania association is doing some good work along lines of educational publicity. A great deal of space is obtained in the newspapers for news items, health articles, stories and current pictures. Special material is supplied to labor publications. A live little four-page bulletin called *Health Hints* is circulated in large quantities. The use of motion pictures, combined with talks and the distribution of printed matter, has been highly developed. Through the summer such picture displays are given at all the playgrounds of the city. The tuberculosis films used are "Hope," "The Awakening of John Bond," and "The Train of the Germ." A comic picture is always run in to get the crowd.

Similar motion-picture methods are being followed in Minneapolis, Brooklyn and Cleveland.

Real Campaigning

May the results obtained in West Virginia be commensurate with the vigor and persistence shown by the state association in campaigning through that rugged commonwealth. In describing a recent trip through some of the rural sections, the executive secretary says: "Those who do not know about our mountain roads with hills like the sides of a steep roof, slippery with mud, sometimes hanging over precipices, can have but little conception of what it means to make such a tour, but our 'tin Lizzie' got us there and back again. Once we were within two miles of our destination when we found a great tree across the road. We had to back out until we could turn and then go miles around to get there, but we held every meeting, except one in the afternoon."

Trudeau School

The fourth session of the Trudeau School of Tuberculosis, at Saranac Lake, N. Y., June 14 to July 25, was attended by some 25 physicians, a larger number than at any previous session. There were more than 40 applicants for admission to the course but the number had to be limited, so that those in attendance could receive individual attention from the instructors. This is the only post-graduate school in the country devoted exclusively to tuberculosis, and the men and women admitted are either physicians who wish to specialize on the disease or specialists who wish to go deeper into research. Those enrolled this year were from many states and from Canada. Dr. H. A. Pattison, medical field secretary of the National Association, took the course.

Minneapolis Moves

Tuberculosis work appears to be vigorously on the move in Minneapolis. A program of main objectives for the next three years has been drawn up and published. This program is summarized in the *JOURNAL OF THE OUTDOOR LIFE* for August and fully outlined in a leaflet which may be obtained from the Minneapolis Committee, and which contains good suggestions for other communities. Some of the principal things in view are an open-air all-the-year camp for working girls, a preventorium for children and the development of educational work in factories and through trade unions.

Tuberculosis Primers

In connection with educational and preventive measures for children, attention is called to a Tuberculosis Primer for School Children, published by the bureau of tuberculosis of the California state board of health.

This neat little booklet of 46 pages is written in simple language, deals only with essentials and is attractively illustrated. In an introduction the state superintendent of schools recommends it for text-book use. "The more the children know of the truth," he says, "the more these newly discovered facts filter from the learned scientists into the rank and file of the people, the greater becomes our ground for hope." The text is written by Dr. Robert A. Peers, of Colfax, Calif. Copies may be secured from Mrs. E. L. M. Tate-Thompson, director of the bureau of tuberculosis and secretary of the state association.

A smaller catechism and primer is issued by the Delaware association. It consists mainly of simple questions and answers. It is not illustrated, but is brief (8 pages), very practical and easily understood. Copies on request.

Austin Quizzes

Austin, Texas, is making politics count in the local tuberculosis situation. The United Charities, which includes this problem among its activities, has adopted a resolution, to be mailed by registered letter (receipt requested!) to each of several candidates for the office of county commissioner. The resolution, which is self-explanatory, is worth quoting entire:

"Whereas, the United Charities Association, having a thorough knowledge of the tuberculosis situation in Austin, and being aware of the fact that these patients are scattered over various residence sections of this city, and are a danger to the citizens of Austin, and being further alive to the fact that the disease is spreading to an alarming extent, and learning from the report of the city physician of Austin that there were twenty-three deaths from this disease during the month of May, being almost one-fourth of the total number of deaths for the month; therefore be it

"Resolved, That the various candidates for office of county commissioner be asked to write an open letter to the press, stating their views with reference to this important public health measure, and pledging themselves to make provisions for the establishment and maintenance of a tuberculosis camp for the people of this county in accordance with the State law so providing for such care."

Herald of Well Country

The most ambitious monthly organ of a tuberculosis association which has come to the BULLETIN's attention is *The Herald of the Well Country*, published by the New Mexico Public Health Association, under the editorship of John Tombs. The *Herald* is more than a bulletin—is in fact a monthly magazine of some 24 pages, illustrated, carrying many advertisements and having a large subscription list. It covers the general field of public health. The July number reports rather fully the annual meeting of the National Association.

Montana Starts Things

The Montana Association is starting some things which are designed to put that state further up in the progressive list. The work and general objects of the association were presented and endorsed at two recent state-wide gatherings—those of the federation of women's clubs and the medical society. At the latter special interest was taken in the need for additional hospital accommodations to provide treatment for returned tuberculous soldiers. This occasion in fact marked the opening of the association's campaign for one or more state sanatoria.

To promote this campaign, and to reach the rural population especially, advantage will be taken of the county fairs, at which exhibits will be made and material distributed. News and educational articles will be supplied to the papers throughout the state. Several tuberculosis nurses have been put to work in different localities, and are expected to create enlarging centres of interest. Finally, two or three local tuberculosis surveys are being undertaken, in cooperation with the state board of health. One of these, covering Blaine County, has been under way for the past six weeks and is now nearly completed. A similar stock-taking is going on at Deer Lodge. These surveys will be focused particularly upon the problem of the tuberculous soldier.

T. B. among Women

The local association at South Bend, Indiana, is pointing the way for other communities to make war-time machinery count toward reducing tuberculosis among women. The state has been registering all women for war service. The president of the local association, as it happened, was appointed chairman of the registration committee for South Bend. According to a letter at hand from the association, "She instructed all the registrars, in getting the physical history, to emphasize any lung trouble. The names of persons thus affected are being submitted to us and we have sent the nurse out to visit them. We have been able to uncover new cases in this way, and the women have usually been willing to come to the clinic for examination. We have persuaded several to take the treatment at Healthwin."

Three More Bulletins

Over Here, the new bulletin of the St. Louis Society, made its initial appearance in July. "In looking so intently at the war 'over there,'" says the editor, "we sometimes fail to realize the war duties and problems for us 'over here.'" The bulletin's functions will be to keep the people of St. Louis in constant touch with the society and its work. The first number consists of four pages, one made up entirely of pictures showing some of the society's activities, and the others of pithy items of both local and national interest.

Health Peaks is the appropriate and striking title of the new monthly bulletin of the Colorado (formerly Rocky Mountain) Public Health Association, which made its debut in July. The first page is given to an announcement of the Southwestern Sectional Conference, to meet in Denver, October 4-5. Other subjects covered are the Framingham Demonstration, what Wisconsin and Illinois are doing to meet public health nursing problems and the care of returned tuberculous soldiers in Colorado. In make-up the bulletin consists of four pages printed in typewriter style.

The Open Air Messenger, another new bulletin—thus far a quarterly—is published by the New Hampshire association. It began in February. The May issue is devoted largely to a discussion of tuberculosis as a war problem. The last page outlines the association's program for the ensuing year. This bulletin has four pages and is well printed.

Paragraph Jottings

The tuberculosis nurses of the Delaware association in Wilmington have been given the status of officers of the board of health. The association reports that this has been of much practical assistance.

The New Hampshire association, which is the youngest in the state fold, has already covered nearly all the cities and larger towns of that state in an educational campaign of exhibits and health talks. Local arrangements are made usually through the women's clubs.

The Utah association reports that the first strictly tuberculosis nurse in that state began her work in June, and that a second one is soon to be added. An intensive health survey of one county is also on the immediate program.

In the July bulletin of the State Charities Aid Association of New York appears an interpretation of the American tuberculosis work in France, written by Dr. George E. Vincent, President of the Rockefeller Foundation. This article is especially interesting as outlining the motives, background and probable results in the large of American organized health activities in France.

The Framingham Demonstration Emergency Nursing Courses

No. 2: The Sickness Census*

By Mary A. Abel, Educational Assistant

How the Framingham Demonstration made a sickness census of the town of Framingham and what it revealed is the story of Monograph No. 2 just published. The "Sickness Census" is the second of the series of publications to be issued from the offices of the Demonstration and may be had upon request from the Community Health Station at Framingham, Mass.

The sickness census was the first major activity of the Community Health Station and preceded the physical examination of 3,000 of the population of the town. It was the purpose of the Demonstration in this to secure figures on admitted illness for purposes of comparison with other communities surveyed and for comparison with subsequent findings of the medical examinations.

The house to house canvass was made by agents and nurses who were supplied with census forms for tabulating information. In this way admitted illness was recorded and at the same time appointments were made for the physical examinations to follow. In addition to this census a rural sickness study was made for the strictly rural sections of the town.

The Rate of Sickness

The sickness census did not seek to reach every person in the town but covered typical sections of the community and population groups. In all 6,582 people were interviewed, a sufficient number

* These monthly articles in the Framingham series began in July.

to justify safe conclusions regarding the probable prevalence of illness.

The sickness rate for the entire group covered in the census, 6.2 per cent., is a higher rate than has ever been recorded previously. In the sickness census for North Carolina, 2.8 per cent. was reached; Boston, 1.9 per cent.; Rochester, 2.1 per cent.

This indicates that a larger amount of illness was recorded as a result of the

intensive publicity preceding the census, and the more liberal definition of sickness adopted for the study.

A great many minor illnesses were recorded, and the most common of all affections in the order of percentage, were colds, heart disease, rheumatism, diseases of the stomach, tuberculosis,

"coughs," bronchitis, influenza, "nervousness," and diseases of the kidneys.

While the subsequent disease findings on examination were greater than the illness admitted, the figures on tuberculosis are interesting. In the census 38 cases were recorded as being suspiciously or positively tuberculous, 16 of which were confirmed as actual tuberculosis cases on further examination.

The sickness census, aside from the valuable data gained, served as a highly useful instrument for acquiring a more thorough and general knowledge of the community selected for the Demonstration. It proved to be a valuable source of information along social and morbidity lines, particularly regarding tuberculosis, prenatal work, and infant welfare.



Emergency Nursing Courses

Tuberculosis associations are contributing very substantially toward meeting the acute need for emergency public health nurses to help fill the gap made by the war in the ranks of trained nurses available for home service.

Below is summarized briefly information which has reached the National Association regarding such courses in five states:

Minnesota

The first to get under way was in Minnesota. It opened May 27, ran for six weeks, and had an attendance of fifteen nurses. This course was conducted by the Minnesota Public Health Association, in connection with the state university and the social service agencies of St. Paul, where the instruction was given. Nursing problems of the small towns and rural communities received special attention. At least four two-hour lectures were held each week, as well as round-table conferences, while four or five days a week were given to field work and inspection visits. In the fall a four months' course will be given at the university, to which seniors from accredited nursing schools, as well as graduate nurses, will be admitted.

Iowa

Iowa was next in line. There the state association, at short notice, launched a course in June. "We enrolled eight graduate nurses," the secretary of the association writes, "for an eight weeks' course, consisting of one-half to two-thirds time in practice work under expert supervision and the balance in lectures, assigned reading work and special conferences. We originally limited the enrollment to six, to make sure that we could give intensive supervision in the field work, but eight nurses of thirty applying were finally admitted, and all reported for the opening of the course on June 24. Some of the other applicants may be induced to take public health nurses training offered at other places. Others are looking forward to a repetition of the course, which we hope can be given in cooperation with the state university, thereby securing for the nurses a more adequate amount of class room instruction and theoretical work. Only such nurses were accepted as could furnish good reasons why they should not enter Red Cross military service. This seemed particularly desirable, as our announcements were issued at practically the same time that the Red Cross campaign for the enrollment of 25,000 nurses was launched."

Illinois

A little later in June the first of a series of brief courses "for community nurses" was begun at Springfield, Illinois, under the auspices of the state departments of public health and public welfare and the state tuberculosis association. In accordance with a sugges-

Industrial Health Exhibit

To point out the dangers to health which may arise in industry, and to emphasize the vital importance to America of physical and industrial fitness on the part of her army of workers, the Framingham Demonstration is now conducting an industrial health exhibit.

The exhibit includes 130 illuminated lantern slides, relating to factory and home hygiene, and a dozen panels illustrating disease prevention. The need for medical service, nursing and lunch rooms in factories is similarly brought out. A special feature is one of the recently invented stereomographs, which automatically gives a continuous display of slides.

tion of the organized registered nurses of the state, only registered nurses have been admitted. Attendance was limited to fifteen. The time is divided between lectures at Springfield, and field work in various small communities in the state. The course will run for ten weeks and will include general visiting nursing, community organization, public health nursing, tuberculosis, child welfare and school nursing.

Wisconsin

Wisconsin will inaugurate in September a "course for health instructors." This course strikes out along new lines, in that it is not restricted to registered nurses, but according to the announcement of the Wisconsin Anti-Tuberculosis Association, has as its purpose to "equip normal school and college graduates to supervise the health and physical condition of children and adults of the civil population." Even under peaceful conditions, the announcement states, the rapidly growing demand for public health workers had far exceeded the supply that could be recruited from the ranks of trained nurses, and the present course is intended to start a new source of supply. This will be a ten months' course, conducted at the university extension center in Milwaukee. Those enrolled will be carefully selected and the number will probably be limited to fifteen. A broad curriculum has been outlined.

Oklahoma

Last comes the following report from the Oklahoma association: "For your information we wish to say that the Association is conducting the Oklahoma Public Health Nursing Institute beginning July 29, to last ten weeks. This Institute will be for graduate nurses who wish to receive public health training in order to take up public health nursing in this State. We have added to our staff the former chief lady superintendent of the Victorian Order of Nurses, who will be in charge of the course. The Institute is sanctioned by the National Organization for Public Health Nursing, and nurses completing this course will be given certificates accredited by the National Organization."

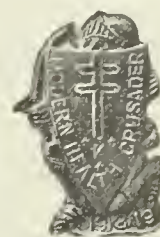
"Carry On"

Carry On is the title of a new monthly magazine launched in June, edited by the Surgeon General of the United States Army and published for him by the American Red Cross. It is devoted to the reconstruction of disabled soldiers and sailors. The first number is well illustrated and very attractively made up throughout. On request, addressed to the Surgeon General's office, this magazine will be sent each month without charge. Tuberculosis workers will be interested especially in any discussion regarding tuberculous soldiers and sailors.

Reconstruction is a similar magazine for Canada, published monthly at Ottawa by the Department of Soldiers Civil Re-establishment.



Modern Health Crusaders Department



The 1918-19 edition of the record folder for the Crusaders' health chores, now being printed, represents an important revision. The chores are:

1. I washed my hands before each meal to-day.
2. I washed not only my face but my ears and neck and I cleaned my fingernails to-day.
3. I tried to-day to keep fingers, pencils and everything that might be unclean out of my mouth and nose.
4. I drank a glass of water before each meal and before going to bed, and drank no tea, coffee or other injurious drinks to-day.
5. I brushed my teeth thoroughly in the morning and in the evening to-day.
6. I took ten or more slow deep breaths of fresh air to-day.
7. I played outdoors or with windows open more than thirty minutes to-day.
8. I was in bed ten hours or more last night and kept my window open.*
9. I tried to-day to sit up and stand up straight, to eat slowly, and to attend to toilet and each need of my body at its regular time.
10. I tried to-day to keep neat and cheerful constantly and to be helpful to others.
11. I took a full bath on each day of the week that is checked.

These eleven chores are three more than the first set, but it will be noted that chores 3 and 10 of the new series are "try" chores, less exacting than the others. A record of 72 chores done in one week makes a perfect score. This requires a bath taken on each of two days and a scrupulous observance of the decalogue preceding that chore, although a third bath may atone for one day's remissness in one of the ten commandments. 75% is a passing score;—54 chores in a week.

A child becomes a Modern Health Crusader and receives his certificate of enrolment and title of Page by doing 54 chores in each of two weeks. To rise to higher ranks and earn the button or pins, the chores must be done for the following number of weeks:

For Squire, 3 weeks after becoming Page, a total of 5 weeks.

For Knight, 5 weeks after becoming Squire, a total of 10 weeks.

For Knight Banneret, 5 weeks after becoming Knight, a total of 15 weeks.

A notable improvement is the provision that the school teacher or other Crusade master shall approve the child's record of chores before he is entitled to rank and badge. By this provision, where the appearance of the child belies his statement, the wrongful award of a pin may be prevented.

The notice to the teacher printed on

* Boys and girls thirteen years of age may change this to "nine hours." Those under nine should sleep eleven hours.

the chore folder gives the essence of a new plan for competition in the Crusade, explained in full in the new manual: "Children should be stimulated by posting their credits in the school-room and by contests between each other and between classes or schools to acquire the highest ranks in the shortest possible time, with corresponding improvement in health. A Page has a credit of 2; a Squire an additional credit of 3; and a Knight and a Knight Banneret, each an additional credit of 5; but credits to be allowed in a contest must all be earned in a period of 15 weeks. Thus the child who becomes a Knight Banneret in 15 weeks has a credit of 15, the highest score; but if he is only a Knight at the end of the 15 weeks, his score is 10, the total of his credits as Page, Squire and Knight. The score of a class at any time within 15 weeks from the beginning of a contest is determined by adding the credits earned by the Crusaders of different rank and dividing the total by the number of children."

As the new chore record folder carries scoring spaces for eight weeks, two folders are enough to carry a child through a fifteen weeks' contest, a substantial part of one school term. With two contests conducted in one year, this part of the Crusade program comes near meeting the demand from numerous school teachers that the work be kept up throughout the school year. The National Association expects to feature these contests. The plan is to publish charts for posting the names of Pages, Squires, Knights and Knight Bannerets, indicating the scores of individuals and of the class on the schoolroom wall.

In the new manual, to be distributed before the opening of school in September, the schedule for meetings has been expanded to twelve months of the year, as follows:

January—Home and school gymnastics. Folk dances. Organized play in medicine. Fresh air, wholesome food, exercise, rest. Methods of outdoor sleeping. *March*—Nervous system. Influence of mind on health. Cheerfulness, anger, courage, purity. *April*—Fly, mosquito and vermin campaigns. Clean-up work. *May*—What and how to eat and drink. Regularity. Weight. Food protection. Clean hands. Typhoid fever. *June*—Temperance, alcohol, tobacco, injurious soft drinks. *July*—Patriotism of health. Marching or military drill. Care of feet. *August*—Outing or picnic. Field athletics and organized play. *September*—First aid to the injured. Posture. *October*—Care of teeth. Toothbrush drill. Care of nose and throat. *November*—Care of eyes, ears, skin and scalp. Baths. *December*—Tuberculosis and respiratory diseases. How to prevent colds. Red Cross Christmas seals.

Tuberculosis Vies with War in Death Toll

Statement by Dr. Livingston Farrand

That the mortality from tuberculosis under ordinary conditions is certainly comparable with and may even exceed the loss of life in battle in the present war, was declared in a statement recently issued in New York by Dr. Livingston Farrand, Director of the American Commission for the Prevention of Tuberculosis in France. Dr. Farrand, who has been in France during the past year, returned to the United States in June to attend the graduation exercises of the University of Colorado, of which he is president. He has now gone back to France to resume his work as head of the Commission.

Dr. Farrand's statement was quoted at length by the press throughout the country. It is here presented in full, as in view of its source and striking character, it lends itself to effective publicity use in many ways by state and local agencies in the furtherance of the anti-tuberculosis campaign in America. The figures as to men rejected in the draft on account of tuberculosis are the first which have appeared with regard to the country as a whole. The predictions as to probable increase of tuberculosis among our civilian population, through indirect effects of the war, are of course based upon the author's study of conditions in France. The fact that from 1905 to 1914 Dr. Farrand was executive secretary of the National Tuberculosis Association means that he speaks also with intimate knowledge of conditions in America.

Dr. Farrand's Statement

"Though the sacrifice of lives in the present war has been so enormous as to make all previous losses on the battlefield appear slight in comparison," said Dr. Farrand, "it nevertheless appears to be a fact that this frightful war mortality does not greatly exceed, and indeed may be exceeded by, the deaths from tuberculosis under ordinary conditions, if equal areas and periods be considered. In the four years since the war began, the total number of deaths from tuberculosis among the civilian population and in the armies of all the countries engaged has at least approximated the total number of soldiers killed in battle.

Significance for U. S.

"The significance of this fact for America, now and after the war, is what I want to point out before returning to France. Though thus far our own casualties in the war have of course been small, it is unlikely that any future American losses, after our army at the front has reached the full proportions in view, will surpass, for a

given period, the total of deaths from tuberculosis among our civilian population. Actual deaths on the battlefield, or as a result of wounds, and not total casualties, are referred to in this comparison. While the total British casualties, for example, were 17,336 for the week ending July 6, actual deaths were 2,736, or only 15% of the total. Each year the death toll from tuberculosis in the United States is between 150,000 and 200,000. This disease leads all others in mortality.

Draft Revelations

"How widespread the prevalence of tuberculosis is has been revealed to America more extensively than ever before as a result of the physical exami-



Dr. Livingston Farrand

nations made by the draft boards and army physicians. Approximately 40,000 men, it would appear from the statistics available, were rejected in the first draft as tuberculous. Many, if not most, of these men have been going about freely in the community not yet aware that they were afflicted with the disease, and that they were sources of danger to others, especially children. Some have known that they had the disease, but have neglected their own condition and their responsibility as regards the health of their associates. Of the men who passed the draft boards, another 10,000, following more searching examination by medical officers of the army, were subsequently discharged on account of tuberculosis, giving a combined total of 50,000.

"While the war has thus effectually disclosed conditions which existed before, rather than produced these conditions, it is also true that in indirect ways it has substantially increased the tuberculosis problem in the European countries involved. I refer not to the situation in the armies where the mode of life often tends to reduce the extent of this disease, but to conditions which affect the civilian population. Increase in the price of food, clothing and housing, has exceeded general increase in wages. Consequently, among the lower wage groups who comprise the mass of the population, food supply has diminished in both quantity and quality. This has produced a state of under-nutrition, which in turn has reduced physical resistance to tuberculosis, particularly among children. Among adults, mental stress and worry have lowered general vitality and increased susceptibility to the disease. These indirect effects of the war are clearly evident in France, and will doubtless become increasingly evident in America as the war continues.

An Appeal to America

"Taken altogether, therefore, the problem of tuberculosis by which America is now confronted is one of tremendous size, in the successful solution of which the best energies of the country will be required. Under the leadership of the National Tuberculosis Association, similar associations in every state and some 1,500 local societies are now conducting a vigorous nation-wide campaign against the further spread of this disease. Both its chronic aspects and its acute war phases, the latter involving chiefly adequate provision for the rejected and discharged men previously mentioned, are being systematically attacked. If I may make an appeal to America, on the eve of sailing again for France, it is this: That the people of America throw themselves into the winning of the war against tuberculosis with the same zeal and efficiency with which they have thrown themselves into the winning of the war against the Kaiser. To make our country really safe for democracy, we must first make it healthy."

The National Association suggests to state and local agencies that the foregoing statement by Dr. Farrand be turned to account in promoting anti-tuberculosis work in each locality. It will serve as a timely special leaflet, or can be used in bulletins, reports and lectures. One or more good local newspaper stories can also be based upon it.

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BULLETIN

NOV 2 1918

OF THE

National Tuberculosis Association

Vol. IV

SEPTEMBER, 1918

No. 12

Joint Red Cross Tuberculosis Campaign

As announced in the BULLETIN for August, the details of the new plan for financing the tuberculosis work in the country are now ready for publication. Briefly the plan proposed does away for this year with the sale of Red Cross Seals and unites the tuberculosis forces with those of the Red Cross in one monster joint campaign for a universal Red Cross membership to be known as the Christmas Roll Call. The tuberculosis agencies are assured also of an income considerably in excess of their gross sales of last year.

In developing the plan the American Red Cross and the National Tuberculosis Association took into consideration every possible phase of the question. Repeated conferences were held and the best thought of both organizations was brought to bear on the problems involved.

The decision was based upon thorough investigation of conditions affecting the raising of money in these difficult war times, and took into consideration the wishes of President Wilson and the Council of National Defence.

The following features of the joint campaign will outline the plan more in detail:

1. The abandonment of the Red Cross Seal sale for this year.
2. The use of the Red Cross Seal, however, as a distinctive feature of the Red Cross Christmas membership campaign, arrangements to be made whereby

each new member of the Red Cross will receive a special packet containing educational literature on tuberculosis, ten Red Cross Seals, and information that will indicate to each of the expected millions of members of the Red Cross that he or she has a distinctive part in the tuberculosis campaign.

3. The advertising of the tuberculosis feature of the joint membership campaign on the part of the Red Cross and the National Association and the emphasis of this feature in the literature put out by the Red Cross, by joint conferences, and in other ways, in an effort both to preserve the integrity of the tuberculosis movement and its Red Cross Seal, and also to bring to a new group of people the message of tuberculosis.

4. The cooperation of the American Red Cross with all anti-tuberculosis agencies, and on the other hand, of all anti-tuberculosis agencies with the Red Cross machinery in their respective communities in an effort to make membership in the Red Cross as nearly universal as it can possibly be made.

5. The Red Cross will bear the expenses of the campaign, including the cost of distribution of printed matter of various kinds. Anti-tuberculosis societies will naturally be called upon to use their office staffs and other machinery for making the campaign a success. If any extra ex-

penses not authorized in advance by the Red Cross are incurred, these would have to be paid locally by the tuberculosis societies. In view of this arrangement, however, the attention of anti-tuberculosis workers is directed to the fact that the appropriation which they will receive from the Red Cross through the National Association is subject to no deductions on account of commissions or other expenses.

6. Because of its own constitutional limitations, the American Red Cross cannot use any part of its membership funds for other than its own work, but in order that the interests of the anti-tuberculosis campaign throughout the United States may be insured against loss and may be safeguarded for the future, the War Council has appropriated to the anti-tuberculosis campaign of this country a sum amounting to \$2,500,000. The National Tuberculosis Association has been designated as the agency responsible for the distribution of this fund. In accordance with our telegram of August 22nd, the Executive Committee of the National Association has arranged to grant to each state as a minimum an amount equal to the gross sale of Christmas Seals for 1917. The distribution of the sum remaining after the allotment of the amount just indicated is to be made on a basis to be determined by the Executive

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BULLETIN
OF THE
National Tuberculosis Association
Published Monthly

In the Interest of Workers Engaged in the
Anti-Tuberculosis Movement by the
National Tuberculosis Association
381 FOURTH AVENUE NEW YORK CITY

Vol. IV. Sept., 1918 No. 12

Entered as Second Class mail matter, October
21, 1914, at the Postoffice at New York, N. Y.,
under the Act of August 24, 1912

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7. It is to be noted that the appropriation referred to in the preceding paragraph is for the calendar year 1919. Details with regard to dates of distribution of funds and the amounts to be distributed on such dates will be considered in the near future.

8. In accordance with the wishes of the American Red Cross and for the protection of the entire anti-tuberculosis movement, the National Association will require a budget to be submitted in advance of an appropriation for 1919 work and also an accurate detailed accounting on forms to be provided of all moneys appropriated as indicated above.

9. All orders for supplies under the former seal-selling campaign are now necessarily set aside.

Preliminary Programs of Sectional Conferences

This year, as last, all the Sectional Conferences will be devoted to the problem of tuberculosis in relation to the War, and especially to the problem of men rejected or discharged by the Army on account of tuberculosis. There will be, however, one essential difference in this year's discussions as compared with those of last year. Then problems were presented and programs outlined in a rather general way. Now, after another year's experience, the Conference will be concerned with the methods which have been employed, the concrete and substantial results obtained to date, and the definite measures which the needs of the future demand.

Nail Things Down

"Nail things down," the heading of our little advance leaflet, will in fact be the keynote of this year's gatherings. Generalities as to the nature of the problems to be met and the means of meeting them will be replaced by specifications as to exactly what these problems have shown themselves to be, and in just what ways and how far they have been solved. In short, there will be a stock-taking of what has actually been accomplished up to this time; and not alone a discussion of further steps required, but a detailed working-out of the advances necessary to "keep the enemy on the run."

The Programs

By the time this number of the BULLETIN reaches its readers, copies of the preliminary programs of all five of the Conferences held under the auspices of the National Tuberculosis Association will have been mailed out. As the BULLETIN goes to press, however, pending questions of detail make it impossible to give all the programs in full. Anyone who is interested may obtain further information by writing either to the National Tuberculosis Association or to the secretaries of the respective Conferences, as noted below. All the meetings are open to the public. The programs (preliminary and subject to change) are given below in chronological order:

Northwestern Conference

Spokane, Wash., (Hotel Davenport)
Sept. 27-28.

Secretary—Mrs. B. B. Buchanan, 916 Cobb Bldg., Seattle, Wash.

Friday, Sept. 27, 10:00, registration. 10:30, general subject, "Health Education of the Civilian Population in War Time;" sub-topics—"Publicity," Mrs. C. R. Athey, Boise, Idaho; "Exhibits;" "Lectures and Talks," Mrs. S. E. Morse, Helena, Mont.; "Printed Material," Frank W. LeClere, Salt Lake City, Utah; "Modern Health Crusade," Dr. B. J. Lloyd, Seattle, Wash.

2:30, general subject, "The Need of Adequate Programs in War Times;"

sub-topics—"Surveys," Mrs. Sadie Orr-Dunbar, Portland, Ore.; "Organization," Mrs. R. A. Morton, Cheyenne, Wyo.; "Hospitals," Dr. A. E. Stuht, Spokane, Wash.; "Clinics," Mrs. Guy Stucky, Missoula, Mont.; "Nurses," Mrs. E. S. Soule, Seattle, Wash.; "Open Air Schools," Mrs. M. A. Phelps, Spokane, Wash.; "Industrial Conservation," Dr. O. M. Lanstrum, Helena, Mont.

4:30, medical session; general subject, "The Diagnosis of Tuberculosis in War Time;" sub-topics—"For Admission to the Army," Major R. C. Matson, Camp Lewis, Wash.; "In Civilian Life," Dr. David R. Lyman, Wallingford, Conn.

8:15, mass meeting under the auspices of the American Red Cross; general subject, "Adequate Care of the Tuberculous Soldier;" sub-topics—"Federal Hospital Provision," Dr. David R. Lyman, Wallingford, Conn.; "Vocational Training;" "Reinstatement into Civilian Life," Prof. F. J. Laube, Seattle, Wash.; "The Tuberculosis Problem After the War," Frederic L. Hoffman, LL.D., Newark, N. J.

Saturday, Sept. 28, 9:30, round-table—"Public Health Nursing," Miss E. E. Grittinger, Portland, Ore., presiding.

11:00, round-table—"The Modern Health Crusade," Mrs. C. R. Athey, Boise, Idaho, presiding.

3:00, dedication of Infirmary at Edgcliff Sanatorium. Addresses by Mayor Fassett of Spokane, Dr. David R. Lyman, and others.

Mississippi Valley Conference

St. Louis (Planters Hotel), Oct. 2-4. Secretary—Paul L. Benjamin, 25 Chamber of Commerce, Minneapolis, Minn.

This Conference is held under the auspices of a Central Council representing tuberculosis workers in the states of the Mississippi Valley. The program is not complete as BULLETIN goes to press. Further information may be obtained from Mr. Benjamin.

Wednesday, Oct. 2, forenoon, registration, meeting of council, business session and luncheon of state secretaries. Afternoon, general subject, "The War and Tuberculosis;" sub-topics—"The Returned Tuberculous Soldier," Dr. Geo. T. Palmer, Springfield, Illinois; "Home Service," Frank J. Bruno, Minneapolis; "The Federal Program," "Army Reconstruction Work for Tuberculous Patients," "Disease Prevention an Essential War Industry," and round-table discussion;—speakers to be announced. Evening, group dinners of secretaries and nurses and reception by local committee.

Thursday, Oct. 3, forenoon, round-table discussions and meeting of clinical section. Afternoon, sanatorium section, and round-table discussions. Evening, mass meeting under auspices of local committee, program to be announced.

Friday, Oct. 4, forenoon, round-

table discussions, and meeting of sociological section, including addresses by W. D. Thurber, of Chicago, on "Fighting Tuberculosis in the Mississippi Valley," and by Wm. S. Groom, of Covington, Ky., on "Popularizing Public Health Propaganda." Afternoon, meeting of nurses' section, including an address on the "Wisconsin Plan," by Dr. Errol V. Brumbaugh, of Milwaukee. Business meeting at 4:30, followed by adjournment.

Southwestern Conference

Denver, Colo. (Brown Palace Hotel), Oct. 4-5.

Secretary—Miss Garnet Isabel Pelton, Denver, Colo.

Friday, Oct. 4, 9:00, registration. 9:30, general subject, "The Need of Adequate Tuberculosis Programs in War Time:" sub-topics—"Education," Jules Schevitz, Oklahoma City, Okla.; "Surveys," Miss Carol F. Walton, Phoenix, Ariz.; "Hospitals," Dr. Charles O. Giese, Colorado Springs; "Clinics," Dr. J. Gelien, Denver, Colo.; "Nurses," Mrs. B. Ewing, Austin, Texas; "Open Air Schools," Dr. J. Metzger, Tucson, Ariz.; "Industrial Conservation," Dr. R. W. Corwin, Pueblo, Colo.

1:00, luncheon. 2:00, general subject, "How to Solve the Problem of the Indigent Migratory Consumptive:" sub-topics—"The Kent Bill," Mrs. Edythe Tate-Thompson, Los Angeles, Cal.; "The Hilliard Bill," Miss Gertrude Vaile, Denver, Colo.; "A Proposed Working Plan," D. E. Breed, Austin, Texas.

8:15, general subject, "Adequate Care of the Tuberculous Soldier:" sub-topics—"Federal Hospital Provision," Major F. H. McKeon, Fort Stanton, N. M.; "Vocational Training," "Reinstatement into Civilian Life," Miss Gertrude Vaile, Denver, Colo.

Saturday, Oct. 5, 9:30, round-table—"Public Health Nursing," Miss Olive Chapman, presiding.

11:00, round-table—"The Modern Health Crusade," Miss Carol F. Walton, Phoenix, Ariz., presiding.

12:30, luncheon. 2:30, inspection of new army tuberculosis sanatorium.

3:30, medical session, general subject, "The Diagnosis of Tuberculosis in War Time:" sub-topics—"For Admission to the Army," "In Civilian Life."

Southern Conference

Birmingham, Ala., (Hotel Tutwiler) Oct. 11-12.

Secretary—Rev. George Eaves, D.D., 311½ S. 20th St., Birmingham, Ala.

Friday, Oct. 11, 9:30, registration. 10:00, general subject, "Health Education of the Civilian Population in War Time:" sub-topics—"Publicity," Homer W. Borst, Jacksonville, Fla.; "Exhibits," Miss Erle Chambers, Little Rock, Ark.; "Lectures and Talks," James P. Faulkner, Atlanta, Ga.; "Printed Matter," Dr. L. B. McBrayer, Sanatorium, N. C.; "Modern Health Crusade," Miss Irene Rogers, Memphis, Tenn.; "A State Health Institute," Prof. Reed Smith, Columbia, S. C.

(Concluded on page 7, column 1)

The Framingham Demonstration

No. 3: Vital Statistics Survey

By Mary A. Abel, Educational Assistant

These monthly articles in the Framingham series began in July.



As an investigative step in the development of the Community Health and Tuberculosis Demonstration program, a thorough study of sanitary conditions was planned early in the work. Through arrangements with the Russell Sage Foundation, the services of Mr. Franz Schneider, Jr., were secured for the undertaking of an analysis of the vital statistics of Framingham, a study of the hazards of life, among infants, in the schools and in factories, and a survey of hygienic conditions as regards food, milk, wells and privies and general sanitation.

Under the name of "Vital Statistics; Monograph No. 3" the statistical phase of the survey has been published.

In pursuing this phase of the work, the Community Health Station staff has been aided by many outside agencies, including the Bureau of Labor Statistics in Washington, the Bureau of Labor and Industry in Massachusetts, the Russell Sage Foundation, the American Museum of Safety, the New York State Commission on Ventilation, the Metropolitan Life Insurance Company, and several educational institutions, notably the Massachusetts Institute of Technology, Simmons College, and Mt. Holyoke College.

In planning the study of vital statistics it was decided to make the analysis cover a ten-year period, partly so that the variations of different diseases over this period might be observed, and partly so as to have a sufficient body of information to make the computation of precinct death rates justifiable.

The work in Framingham was initiated shortly before January 1, 1917, and was in part well under way during a fraction of that year. A summary of the mortality finding for 1917 in Framingham may be of interest, as indicating the conditions under which the Demonstration was working, and the statistical basis with which its subse-

quent results will have to be compared. The situation as regards mortality is not offered as a manifestation of the effect of the Demonstration program. All that can be said at the present time is that it indicates a tendency. This tendency, being in the direction of lower rates, must be maintained and if possible accelerated, if the measures being undertaken are to prove of worth.

In Framingham during the decade studied (1906-1916) the general death rate including non-residents was 15.3 per thousand. In 1917 it was 15.1. The tuberculosis death rate per 100,000, corrected for non-residents and death certification errors, was 121.5 for the preceding decade, and 99.0 for 1917.

The main conclusions, drawn from the foregoing study, may be indicated as follows:

1. There is a close correspondence between the local and the national mortality statistics.
2. The community is experiencing a rapid growth (22.4 per cent. increase in 5 years). This growth is largely in the lower age groups (75 per cent. under 40 years), and particularly affects the foreign born, notably the Italian population. Growth statistics vary greatly for the different precincts.
3. The death rates fluctuate year by year, owing doubtless to the small population group under consideration. On the other hand, there is no marked tendency for general improvement during the decade. It is a question how much a three- to five-year Demonstration may affect the mortality from degenerative disease.
4. The leading causes of death are organic heart disease, Bright's disease, cerebral hemorrhage, cancer and tuberculosis, in the order named.
5. Tuberculosis and infant mortality present the best opportunities for attack upon the mortality rates.

Delineator Health Stories

For some good examples of health education put out in generally readable form, tuberculosis workers are referred to a series of articles now running in *The Delineator*, having begun in April, 1917. These articles deal with that magazine's "Save the Seventh Baby" campaign, which has attracted attention throughout the country. Based on statistics showing that one baby out of every seven dies in its first year, this campaign has had as its object the making of local

surveys, subsequent organization of baby-saving work and general publicity, to reduce this infant mortality. The campaign has been under the executive direction of Dr. Charles E. Terry, formerly health officer of Jacksonville, Florida.

The *Delineator* articles take up the midwife problem, milk supply, infection by flies and similar questions. They are illustrated by photographs and sketches and are written conversationally.

Suggestions from the Field

This department of the BULLETIN is designed to give brief information regarding anti-tuberculosis activities in different parts of the country. The items published are presumed to deal with new lines of work or new methods and to contain suggestions of general value. Tuberculosis workers are invited to send appropriate information to John Daniels, Publicity Secretary.

Cambridge Educates

The Cambridge, Mass., association is doing some substantial work along educational and preventive lines—"We are now preparing a lecture which we shall call 'Know Your City!'" the secretary reports. "It will be illustrated, and we hope to make the slides tell the story so well that they can be used by almost anyone, when it is not convenient to send a trained lecturer. The object of this lecture is to acquaint people with the health situation in our city; also with the various medical and educational resources. There will be a pin-map of Cambridge showing the number and location of deaths from tuberculosis for ten years. Another slide will show in chart form the yearly deaths and cases reported. There will be pictures of the tuberculosis dispensary, the hospital, open-air schools and other agencies, always giving addresses, hours of clinics, and similar practical details. We are also planning monthly leaflets, each on a timely subject, to be distributed probably through the schools. The first one will emphasize the prevention of contagious diseases, and this will be followed, as the cold weather approaches, by one on ventilation and others suited to the season. This summer we are making a special effort to have small window exhibits in all parts of the city. These exhibits will consist chiefly of posters and panels emphasizing various health subjects."

Labor Speaks

The Labor League of New York City is preparing to take a definite stand in the coming fall campaign to insure the welfare of its members and their fellow workers in New York State. Two of the planks in its state platform are as follows:

Establishment of state-administered health insurance and the creation of a bureau of sickness prevention and health promotion within the state labor department.

Erection and maintenance of a tuberculosis sanatorium in each county, with county management and state supervision.

New York Schools

Among the positions under the New York State department of education for which civil service examinations will be held soon, is one of "physical diagnostician." It is announced that the person selected for this new position is expected chiefly to direct a systematic campaign against tuberculosis throughout the public schools of the state. Applicants, it is specified, must have had experience in the treatment of this disease. The salary is fixed at \$4,000. Two other new positions closely related

Fly Checking in Cincinnati

The Cincinnati Anti-Tuberculosis League has recently got out the clever piece of publicity shown by the accompanying illustration. "On Saturday, June 8," the Secretary of the League writes, "Boy scouts distributed 15,000 copies of the check at the important street corners in the city. Several manufacturing concerns placed checks in their employees' pay envelopes. Altogether it was a very

successful campaign, several people returning to ask the Boy Scouts for additional checks. As far as I can determine, not one of them was thrown into the street. Because of their resemblance to real checks many persons used them for playing jokes upon their friends and thus the information about the fly was spread still further."

CINCINNATI, OHIO June to September 1918 No. 1

THE PEOPLE'S FLY-CHECKING Co.

MEMBER OF PUBLIC HEALTH RESERVE SYSTEM

SWAT AT THE
ORDER OF Bearer  1,000,000

One Million FLIES

Highest Rate of Interest in the World
Swatting One Fly in June Saves Swatting
1,335,200,000 by September.

Cincinnati Anti-Tuberculosis League

ENDORSED HERE

*By Merchants - because
flies ruin thousands
of dollars worth of
merchandise annually*

*By Public Health Agencies
because flies spread
tuberculosis, typhoid-
fever, infant disease,
etc.*

*By the People - because
flies are filthy; they
breed in manure; they
carry prying-flesh, spit
and germs on their feet
and walk on baby's food
and yours*

SWAT THE FLY
REMOVE OR DISINFECT
MANURE PILES
SCREEN WINDOWS & DOORS
COVER ALL FOOD
SWAT THE FLY

to the tuberculosis problem are those of oral hygiene inspector at \$3,000 and expert on nutrition at \$2,000.

"Tuberculosis Theses"

Impressed with the educational value for physicians of an article entitled "Tuberculosis Theses" by Dr. Lawrason Brown, which appeared in the June, 1917, number of the *American Review of Tuberculosis*, the Tuberculosis Committee of the New York Charity Organization Society has had reprints made of the article. These are being distributed among students in medical colleges and internes in the hospitals of New York City. Copies of the reprint may be obtained from Frank H. Mann, 105 East 22nd Street, New York City.

Employees Fight T. B.

The Employees Tuberculosis Relief Association of Bridgeport, Conn., is one of the largest and most active organizations of its kind.

Within the different factories of the city 15,000 employees are represented by this association. It insures to all

employees of factories throughout the city care if stricken with tuberculosis, in the way of medical treatment and an allowance of \$4 a week as long as they are ill.

Practically all of the large manufacturers of the city are affiliated with the organization. No expense is incurred as far as salaries of officers are concerned. All funds are turned over to the treasurer to be used exclusively in taking care of the patients.

Federal Health Merger

By an executive order dated July 1, 1918, President Wilson provides that henceforth all public health activities of the government (except those of the Surgeons General of the army and navy and those of the Provost Marshal General) "carried on by any executive bureau, agency, or office, especially created for or concerned in the prosecution of the existing war," shall be put under the control of the treasury department to eliminate duplication and establish unity of policy. This action may have important future results in federal health organization.

Tuberculosis Work Among Negroes

The problem of tuberculosis among Negroes, where the mortality and death rates from the disease are in general very high, is admittedly one which as yet has received far from adequate attention. Though applicable in different degrees to different sections of the country, this observation holds true in all sections to an extent that affords little cause for satisfaction. At the same time, throughout the country, the seriousness of the problem is recognized.

Articles dealing with this problem, as regards both the facts themselves and the measures necessary in view of these facts, will be published in the BULLETIN from time to time henceforth, as material at hand warrants. To aid in the distribution of information and experience concerning this subject, the Association would be glad to hear from state and local associations, and from other agencies or individuals interested, as to what is now being done or planned in their respective localities to meet this need. The question of how far the Negroes themselves are acting in the matter, either in an auxiliary way or independently, is of special interest.

In the present article, it is possible to report, though in a fragmentary form, upon some of the ways in which this problem is being taken up in a number of localities, especially in the South. These undertakings hold out much of promise, not only in the way of practical local service but as experiments and demonstrations which will be watched by other localities for their own guidance. Note will be made first of what some state associations are doing, and then of more intensive work in cities. It should be understood that the present account does not purport to be comprehensive as regards the localities mentioned, but simply puts together some scattered and partial recent items.

Good Work in Four States

The Delaware association (State Tuberculosis Commission) writes: "One of the staff nurses made a survey of a colored school in Wilmington last fall, and as a result of this, we will have this fall a model school and the first open air school under the board of education and this commission, which we feel is very much needed."

A letter from the Virginia association says: "Four years ago we were at the foot of the foot of the ladder as to beds, having about three hundred in the State, without a single bed for Negroes. We now have a Negro hospital with 80 beds and 40 more promised."

The Tennessee association has some ambitious but practical plans on foot for tackling this problem, including the employment of a well-qualified Negro field agent and auxiliary Negro committees.

In Arkansas, the annual institute of Negro school teachers, held earlier this summer, was utilized to present the tu-

berculosis problem and enlist the cooperation of the teachers in educating the Negro population throughout the state as to the treatment and prevention of the disease.

Maryland Campaign

Maryland, hitherto, has been distinctly backward in efforts to meet this problem, but has now taken a stride forward in the passage by the legislature last spring of a bill appropriating \$75,000 for the care of tuberculous Negroes. Though it is expected that this will provide for about 75 beds only, it is nevertheless a good beginning. Credit for this legislation belongs largely to the Maryland association, which conducted a well-judged campaign of newspaper and exhibit publicity throughout the State. In this publicity stress has been placed upon the danger to the community as a whole resulting from neglect of tuberculosis among Negroes. "Tuberculosis germs are spread by Negro servants," ran one headline, to substantiate which actual cases were cited. On account of the difficulty of persuading Negroes to go to hospitals at any distance from their homes, the plan in view in Maryland is to add small Negro wards to a number of hospitals in different parts of the state.

Florida Going Ahead

The Florida association, in a recent bulletin, states that "in St. Petersburg a young Negro woman has been engaged for nursing service among Negroes who are suffering with tuberculosis, and a small hospital for Negro tuberculosis patients has been provided. This nurse, in addition to her training, was sent to Jacksonville for a special course in public health nursing." It is also reported that "Daytona has an excellent nursing service now being prosecuted among the Negroes by the Public Health Association and the seal money is being returned to that organization in the belief that in this way the present service may be continued and enlarged."

Progress in North Carolina

From the North Carolina association comes this interesting news: "We are employing a colored woman who has had two years' experience in nursing and has been a teacher and a supervisor of county teachers. In addition to this we are cooperating with the board of education in the employment of about 35 rural supervisors in the various counties and have organized colored Community Leagues in every community where there are sufficient Negroes to have a school house. These are studying tuberculosis in particular, and hygiene, sanitation and the prevention of disease in general, and make reports direct to us. We now have 500 of these leagues organized with a membership of 15,000. Among other

things they reported to us last month about 75 cases of tuberculosis, which are being visited and instructed by the committees of the Community Leagues appointed for that purpose under our direction."

Organizing in Atlanta

The Atlanta association, in its report for 1917, describes an intensive anti-tuberculosis campaign carried on among that city's 60,000 Negro residents, with the assistance of the association's Negro branch, and a special committee "which included physicians, ministers, nurses, men and women workers of both races." The undertaking was linked up with the clean-up campaign under the auspices of the National Negro Business League, in which Atlanta succeeded in winning the first prize. The cooperation of every important white and Negro organization in the city was enlisted. Insurance companies furnished 50,000 health leaflets. Traveling clinics were conducted and public meetings held throughout the Negro districts. Over 33,000 persons were reached in one way or another. Over 600 were examined and of these all but a small fraction were referred for treatment for various conditions. "The work has not yet been finished," the association states, "and the good effect of it will never be lost upon the communities in which these clinics were held. . . . The association now has two colored nurses who are giving their whole time to this work."

Results in Cincinnati

The most noteworthy results in the actual reduction of the tuberculosis death rate among Negroes and the fullest discussion of the factors involved are presented in the report of the Cincinnati association for last year. From 1912 to 1916 the negro tuberculosis mortality rate declined 23.3% as compared with a decrease of only 6.5% among the whites and an increase among Negroes over the registration area of the country as a whole. After analyzing in turn the various factors which might possibly account for the local decrease among the Negroes in Cincinnati, the report concludes that the extensive educational preventive and curative work which has been carried on in that city is responsible for the reduction. In 1908, only 673 Negroes were reached through lectures and literature; by 1914 over 20,000 were reached in these ways. In 1910 only five nurses' visits were made to Negroes' homes; in 1917 a total of 1,164 such visits were made, while visits of Negroes to dispensaries had increased from 80 to 2,010. The report closes with a plea that this work be still further extended, in order that the recent influx of Negroes from the South, which is believed to account for a slight increase during 1917 in the local rate, shall not be allowed to negative the results already obtained.

1917 Red Cross Seal Honor Roll

Complete list of awards of Certificates of Commendation for the purchase of six or more seals per inhabitant:

ARIZONA Flagstaff Maricopa and Pinal Counties Miami Nogales Phoenix Williams	Richmond Ridgway Rio San Jose Shawneetown Shipman Springfield Suffren Tamaroa Taylorville Toledo Toulon Tremont Tuscola Valmeyer Verona Villa Grove Warrensburg Watago White Heath Witt Woodstock Xenia Yorktown	Argyle Arlington Ashby Bakaton Barnesville Barnum Barrett Battle Lake Baudette Belgrade Benson Big Lake Blooming Prairie Blue Earth Boyd Braham Brandon Brewster Broton Brownsdale Buhl Caledonia Canton Ceylon Chaska Chisago City Chokio Clarkfield Cleveland Cokato Coleraine Confrey Crosby-Ironton Cottonwood Cyrus Dassel Dawson Deer Creek Deer River Delavan Dilworth Dunnell Edgerton Elgin Elk River Ellendale Elmore Elysian Emmons Erskine Eveleth Excelsior Farmington Fertile Fisher Foley Fosston Fountain Freeborn Fulda Gibson Glenwood Goodhue Granada Grand Marais Grand Rapids Granite Falls Greenbush Grove City Hallock Hanley Falls Hanaka Hartland Hawley Hayfield Hector Henderson Hendricks Hendrum Henning Hill City Hills Hinkley Hoffman Hopkins International Falls Iona Ivanhoe Janesville Kasson Kellogg Kenyon Keewatin Kerkoven Kilkenny Klinhall Lake Crystal Lakefield Lake Park Lamberton Lanesboro Lewisston Lindstrom Litchfield Little Falls Long Prairie Luverne Lyle McIntosh Mabel Madella Madison Mahnomen Maple Lake Marlette Mazepa Milaca Minneapolis Minnetonka Minnesota Lake Monterey-Triumph Montverde	Monticello Moose Lake Mora Morris Morristown Murdock Nevis Newport New Prague New Richmond New York Mills Nicollet North Branch Northfield Northome Ogilvie Okabena Olivia Oslo Osseo Parker's Prairie Paynesville Pelican Rapids Perham Pine Island Pipestone Preston Princeton Red Lake Falls Robbinsdale Rochester Rockford Round Lake Rushmore Red Wing Sauk Center Scanlon Sherburn Springfield St. Charles St. Cloud Starbuck Stephen Stewart Taconite Taylor's Falls Tracy Truman Twin Valley Vernon Center Wabasso Wadena Wahkon Waldorf Waseca Wayzata Wendell Willow River Winger Winnebago Winton Wolverton Worthington Zumbrota Zumbro Falls	Townsend Virginia City Whitefish White Sulphur Wibaux NEBRASKA Arnold Bayard Bridgeport Bristow Gering Hardy Morrill Newport Randolph Schuyler Scottsbluff Spencer Sterling NEW JERSEY Bloomfield Bound Brook Englewood Glen Ridge Irvington Montclair Morristown Plainfield Princeton Rahway Summit NEW YORK Andes Aurora Bloomville Bolivar Bronxville Cannonsville Cherry Valley Cobleskill Cold Spring Cooperstown Cornwall Dansville Davenport Delbi Downville Elmira Franklin Freeport Glens Falls Hamburg Harrison Hobart Ithaca Johnstown Larchmont Lewiston Margaretville Maryland Medina Montour Falls Olean Oneida Oneonta Oswego Otego Palmyra Patchogue Portchester Poughkeepsie Richfield Springs Rivershead Roxbury Saranac Lake Scarsdale Shelter Island Sidney Center Stamford Tarrytown Troy Unadilla Waterford Watertown Watkins West Oneonta White Plains Worcester	Erick Guymon Henryetta Kingsfisher Madill Maysville Muskogee Norman Okemah Oklahoma City Pawhuska Poteau Prague Rush Springs Sapulpa Shawnee Supply Texhoma Tishomingo Tulsa Wewoka Yale OREGON Halsey Marshfield Milwaukee Ontario Oregon City Wasco PENNSYLVANIA Ben Avon Frankville Greensburg Homestead Munhall Oakmont Pinegrove Sewickley Thornburg RHODE ISLAND East Greenwich Warwick SOUTH CAROLINA Antreville Cope Eastover Eutawville Garnett Greenwood Holly Hill Martin Norway Richer Parksville Springfield Strother Troy Woodford SOUTH DAKOTA Aberdeen Ardmore Armour Belle Fourche Beresford Buffalo Owen Pittsboro Port Washington Prentice Prescott Rhinelander Richland Center Ripon River Falls Soldier's Grove Sparta Stockbridge Stoughton Stratford Sturgeon Bay Tomah Walworth Waukesha Waupum West Bend Wild Rose Wittenberg	Big Lake Coupeville Dupont Harrington Kalama Lowell Lynan Sequim Sprague Three Lakes WEST VIRGINIA Beckley Bluefield Boomer Burton Charleston Clarksburg New Cumberland Weston WISCONSIN Amery Antigo Arcadia Argyle Ashland Beaver Dam Bellevue Blair Boscobel Brohead Burlington Chippewa Falls Clintonville Colfax Columbus Darlington Delavan Elkhorn Elk Mound Ellsworth Evanville Galesville Gilbert Giltett Hartford Horicon Kendall Kiel Kilbourn Lake Geneva Lake Mills Madison Manitowoc Marion Markesan Marshfield Mayville Mineral Point Montello Mosinee Mt. Horeb New Glarus New Holstein New Lisbon Oconto Falls Oshkosh Owen Pittsboro Port Washington Prentice Prescott Rhinelander Richland Center Ripon River Falls Soldier's Grove Sparta Stockbridge Stoughton Stratford Sturgeon Bay Tomah Walworth Waukesha Waupum West Bend Wild Rose Wittenberg WYOMING Basin Buffalo Casper Cheyenne Cokeville Douglas Evanston Gillette Greybull Guernsey Hanna Kaycee Kemmerer Lander Laramie Lovell Lusk Moorcroft Newcastle Powell Rawlins Riverton Sheridan Shoshoni Sundance Thermopolis Torrington Upton Wheatland Worland				
CALIFORNIA Cloverdale Herrlet Watsonville	CONNECTICUT Andover Beacon Falls Bozrah Canaan Cheshire Clinton Colebrook Cornwall Fairfield Farmington Groton Madison Middletown Norfolk Ridgefield Wallingford Woodbury	FLORIDA Sarasota	GEORGIA Adrian Decatur	IDAHO American Falls Bellevue Bonner's Ferry Burley Emmett Filer Fruitland Hailey Hanson Kellogg Moscow Nampa New Plymouth Parna Richfield St. Maries Salmon Shoshone Sugar City Wallace Wardner	ILLINOIS Argenta Bardolph Bement Blandinsville Blue Mound Boody Braceville Carbon Hill Cerro Gordo Chadwick Champaign Chester Cisco Clay City Decatur Downer's Grove Du Quoin Elmhurst Elwin Fillmore Forsyth Galva Gardner Geneseo Granville Harristown Hinsdale Huntley Industry Irving Kincaid Kinsman La Fayette Lawrenceville Long Creek Macomb Macon McHenry Mansfield Maroa Mason City Mazon Milledgeville Milton Minooka Monkello Morris Morrison Mt. Sterling Mt. Zion Naperville National City Niantic Nokomis Oakley Paris Phoenix Pinckneyville Prophetstown	IOWA Albert City Ames Badger Bayard Cambria Clay City Decatur Downer's Grove Du Quoin Elmhurst Elwin Fillmore Forsyth Galva Gardner Geneseo Granville Harristown Hinsdale Huntley Industry Irving Kincaid Kinsman La Fayette Lawrenceville Long Creek Macomb Macon McHenry Mansfield Maroa Mason City Mazon Milledgeville Milton Minooka Monkello Morris Morrison Mt. Sterling Mt. Zion Naperville National City Niantic Nokomis Oakley Paris Phoenix Pinckneyville Prophetstown	MAINE Gardiner Northeast Harbor	MARYLAND Bagerstown	MICHIGAN Baroda Benton Harbor Berrien Springs Bridgman Coloma Eau Claire Gallen Niles Reed City Sodus Three Oaks Ypsilanti	MINNESOTA Ada Adams Albert Lea Anoka Appleton

(Continued from page 3, column 1)

2:00, general subject, "A Complete Community War Program for the Control of Tuberculosis;" sub-topics—"Tuberculosis Work in Cantonment Zones," Dr. C. W. Stiles, Augusta, Ga.; "The Framingham Community Health War Program," Dr. Donald B. Armstrong, Framingham, Mass.; "The Machinery Needed," Rev. George Eaves, D.D., Birmingham, Ala.

4:30, medical session, general subject, "The Diagnosis of Tuberculosis in War Time;" sub-topics—"For Admission to the Army," Major Henry A. Hoagland, U. S. A., General Hospital No. 18, Azalia, N. C.; "In Civilian Life," Dr. David R. Lyman, Wallingford, Conn.

8:15, mass meeting under local auspices, general subject, "Adequate Care of the Tuberculous Soldier," Gov. Henderson, presiding; sub-topics—"Federal Hospital Provision," Dr. David R. Lyman, Wallingford, Conn.; "Vocational Training," Dr. Douglas MacMurtrie, New York, N. Y.; "Reinstatement into Civilian Life," Joseph C. Logan, Atlanta, Ga.

Saturday, Oct. 12, 9:00, round-table—"Public Health Nursing," Miss Jane Van deVrede, Atlanta, Ga., presiding.

11:00, round-table—"Red Cross Home Service Care of the Tuberculous Soldier," Harry L. Hopkins, New Orleans, presiding.

12:30, luncheon. 2:30, general subject, "The Tuberculous Negro," Bolton Smith, Memphis, Tenn., presiding; sub-topics—"Health Education of the Negro," F. A. McKenzie, Ph.D., Nashville, Tenn.; "Organization of the Negroes," field, New York, N. Y.; "Organization of the Negroes in North Carolina," Dr. L. B. McBrayer, Sanatorium, N. C.

North Atlantic Conference

Pittsburgh, Pa., (William Penn Hotel)
Oct. 17-18.

Secretary—Miss Alice E. Stewart, Bedford avenue and Wandless street, Pittsburgh, Pa.

This program, details of which will be given in the BULLETIN for October, will follow the same general lines as those preceding.

New England Conference

Providence, R. I., Oct. 25-26

Secretary—Willis E. Chandler, 109 Washington street, Providence, R. I.

As regards this Conference also, the publication of program in the BULLETIN must be deferred till October.

Health Singing!

As suggesting a mode of approach to our problem among the Negroes, which turns to educational account a well-known characteristic of the race—namely, their love of song—a clipping just at hand from Louisville, Kentucky, is most interesting. Arrangements are being made to hold a folk song festival for Negroes, the clipping states, at which songs by Negro composers will be sung by a colored chorus of 300 men and women, to "spread the gospel of correct singing as a preventive of disease, especially of tuberculosis."



Modern Health Crusaders Department



The new manual of the Modern Health Crusade, a twelve-page pamphlet, is now on the press. Sample copies will be ready for distribution when this BULLETIN is published.

The manual is a practical guide for the enlistment of Crusaders, their drill in hygiene and participation in public health work, both for children in schools and other organized groups, and independently. Emphasis is laid on the Crusade as a system of health education and promotion rather than as an organization. Thus, Boy and Girl Scout troops and varied organizations as well as schools may take up the Crusade as a phase of their work.

The Crusade has demonstrated that it has a mission in leading the many schools to adopt the practical methods of teaching hygiene which have hitherto found place only in the few. These methods are described in the chapter in the manual relating to schools. Under the heading of "Questioning and Inspection," a series of questions is described, based on the health chores to be applied to the pupils in the classroom. The National Association supplies its health chore question sheet for recording the answers to these questions. This sheet also is used in a competition between the children in the performance of the most chores within a week.

The manual gives instruction on conducting hygienic inspection in the class based on the experience of schools in several cities. Under the system of health chore questioning reinforced by hygienic inspection, the child receives in school a prompting on chores, making the attention given to these at home doubly effective.

The plan of competition described in the August BULLETIN based on the progress of health knighthood is described in the chapter on tournaments. Under this plan of competition, not only are tourneys between crusaders possible in the smaller Crusade groups, but state and national tournaments are conducted as well. The national tournament, continuing the national pennant competitions familiar to Red Cross seal workers, will be described more fully in a circular, "The Field of the Cloth of Gold."

The "Roll of Health Knighthood" is the title of a handsome school chart which the National Association now has on the press for posting the names of all the members of a class and starring the children who become Pages, Squires, Knights and Knights Banneret.

A model constitution is printed in the manual for work in schools. Health inspectors and window inspectors are recommended as officers additional to those named in the constitution.

The manual describes the new 1918-19 insignia and the certificate of enroll-

ment. The latter carries a reduction of the daily health guide chart suitable for posting in the home. The 48 state associations affiliated with the National Association are listed alphabetically in the manual as the primary distributors of supplies for their respective territories.

October Meeting

The subject for the October meeting, "Care of teeth; tooth-brush drill; care of nose and throat," offers possibilities for a particularly interesting demonstration. A dentist may be secured to talk to the children, showing the structure of the teeth with the aid of a manikin; or the Crusade master may prepare a talk, using the following reference matter.

"Instructions for the Home Care of the Mouth," a practical pamphlet issued by the Bridgeport (Conn.) Board of Health, may be secured by any Crusade worker applying to the National Association. Crusade masters (teachers) should have the companion leaflet giving directions for conducting a tooth-brush drill.

Colgate & Co., Jersey City, N. J., supply free material, including "The Jungle School," a story on the care of the teeth, told in illustrated comic verse.

The illustrated booklet, "Teeth, Tonsils and Adenoids," issued by the Metropolitan Life Insurance Co., New York, covers the whole subject of the meeting, with the exception of the drill.

A health playlet for October, emphasizing the value of medical inspection in schools, is "The Imps and the Children," wherein the villains Toothache, Snuffles and Sore Throat are dispersed by doctor, dentist and nurses. The National Association can supply copies for each of the 24 characters for 27 cents; or single copies, 2 cents each.

The July number of "How to Live," to be obtained from the Life Extension Institute, 25 West 45th St., New York, pictures the disclosures of the X-ray in the human mouth. A formula for an effective and pleasant, though cheap, tooth powder is given both here and in the Bridgeport pamphlet, as follows:

Finest grade English precipitated chalk $\frac{1}{2}$ lb., powdered Castile soap $1\frac{3}{4}$ oz., light carbonate of magnesia $\frac{1}{3}$ oz., oil of clove 46 drops, oil of wintergreen 35 drops, oil of sassafras 35 drops, oil of peppermint 18 drops, saccharin, finely powdered 4 grains.

The children of the poor do not need to resort to expensive pastes, where they are taught inducements for cleaning teeth other than a good taste. Fortunately for economy, many dentists pronounce a normal salt solution as good a dental wash as any. It consists of one to $1\frac{1}{2}$ teaspoons of ordinary domestic salt dissolved in a pint of water. Another good wash is made of equal parts of salt, borax and baking soda dissolved in water in the same ratio as the normal salt solution.



Men "Rejected" and "Discharged"

Under the present methods of dealing with new increments of drafted men at the camps, the men are examined very promptly after arrival, not only by the regimental surgeon but by the special examiners. Those found physically unfit for service are "rejected" and given transportation money for return to their homes; those found fit are accepted for service. If a man breaks down after such acceptance, he is "discharged."

The distinction between "rejected" and "discharged" men is very clearly explained in a letter received by the National Tuberculosis Association from the Surgeon General's office, which reads:

"The Surgeon General directs me to inform you that when a registrant reports at Camp for his physical examination he is either accepted or rejected. If he is once accepted he can then only be discharged for physical disability on Surgeon's Certificate of Disability.

"The term 'rejected' is used for registrants before they become soldiers; the term 'discharged' implies that the man has been accepted into the military service.

"(Signed) E. H. Bruns, Lt.-Col., U.S.A."

According to the above, the rejected man is not a soldier any more than a man exempted by the local draft board. If the cause of rejection is tuberculosis the only difference in his status in the community is that he is now a known case; whereas, before, he himself as well as public health authorities may have been entirely ignorant of his condition. The Government assumes no responsibility for him except to provide for his return home. He has no claim to compensation.

Under former rulings and methods a drafted man might have passed the regimental surgeon, been accepted for service and then, after going before the tuberculosis reviewing board several weeks later, be found tuberculous and discharged as "not in line of duty." Such a man, believing he had broken down because of his stay in camp from exposure, over-fatigue, or acute infectious disease, could have his claims reviewed by the Bureau of War Risk Insurance and perhaps be awarded compensation.

During the few days a drafted man is now in camp before examination he might receive an injury or become acutely ill. He is apparently not an accepted soldier and whether he would have any right to indemnity from the Government apparently remains to be determined. The number of such cases, however, will be exceedingly small and such men could probably have no rightful claim for compensation as soldiers.

Discharges from army tuberculosis hospitals are as yet very few. The various sanatoria being erected under direction of the Surgeon General are nearing completion, and will provide ample facilities for men who break

down. It is probable and very much to be hoped that tuberculous soldiers will avail themselves of the treatment offered.

But rejections from camps are relatively large, and the names and addresses of men so rejected which are forwarded to state agencies will constantly increase in number. These men present a distinctly civilian problem. The Red Cross has not yet stated what its attitude towards this group will be. If it is determined that they are not proper cases for Red Cross service the responsibility of anti-tuberculosis societies will be correspondingly increased.

The reports thus far received by the National Association in response to the questionnaire sent out July 25 indicate very clearly that many state secretaries have not yet grasped the serious significance of the problem of the rejected tuberculous conscripts, nor dealt with these cases in thoroughgoing fashion. A summary of reports from twenty states show the following facts:

Number of names received....	6301	
Addresses lacking or incomplete	392	6.2%
Soldiers not at address given..	432	6.8%
Such cases found elsewhere...	112	
Actual contact established....	1587	25. %
By replies to letter.....	567	
By visits to soldiers.....	981	9%
By visits from soldiers.....	39	16%
Treatment refused by.....	138	
Treatment provided at home....	162	
Treatment provided at clinics....	86	
Treatment provided in sanatoria	123	
Treatment provided elsewhere..	24	
Total provided for.....	395	
Total provided for outside of homes	233	3.7%

Among these twenty states, five received 2,854 names and made actual contact with 1,123 of these men, or approximately 39%. This indicates better organizations in these five states than in the others. The percentage of men provided with treatment outside of the home in these five states, however, was not much greater (being but 5.2%), than in the case of the entire twenty states.

Food for Sanatoria

The following memorandum from the States Administration, Division of the United States Food Administration, under date of August 14, 1918, very clearly indicates the attitude of Mr. Hoover's department toward tuberculosis sanatoria.

"Institutions should be treated as hotels in their buying of flour, sugar, meats, etc., and all Food Administrators have been advised to make individual modifications of the existing rules governing these commodities when in their judgment such modifications are necessary to insure the health of inmates, and have been asked to bear in mind that the number of people fed in such hospitals whose diet requirements are perfectly normal is a very large percentage of the total fed, including all nurses, domestic servants and other members of the staff, in addition to such patients as do not require a special diet. *It is proper for Food Administrators to bear in mind that a portion of the employees of tubercular sanatoriums are arrested cases of tuberculosis and need a special*

diet. It is not intended that any people so affected shall be deprived of food in quality and quantity for their up-building and the maintenance of their full health. The question came up very generally last winter but we hear very little of it now, and we believe this method of handling the matter rather than by a general order has met the situation satisfactorily. The Food Administrators have used excellent judgement and have been able in a vast number of cases to secure the cooperation of those in charge of such institutions."

Capital Issues

In the July number of the BULLETIN, it was stated that the Capital Issues Committee "is endeavoring to secure reliable data from various sources (on sanatorium construction) to the end that it may be fully informed and thus be enabled to deal justly with all applicants, as well as aid the government in its supreme efforts to win the war."

We are authorized today (August 27) by Mr. Selden, Secretary of the Committee, to announce that the Committee's investigation of the problem of war-time construction of tuberculosis sanatoria has been completed and that it is now prepared to give a full hearing to all applicants for capital issues. Already the Committee has approved plans of the City of Detroit for an institution to cost approximately \$350,000. Approval has also been given to two Massachusetts county hospital projects. Approval of a large county project in an Eastern state has been withheld until new plans are submitted.

Strictly speaking, the Capital Issues Committee has no legal jurisdiction over the issuance of securities for construction to cost less than \$100,000. Nevertheless, it feels that the spirit governing all construction in America should be that of patriotic economy. With that attitude the National Tuberculosis Association is in hearty accord and urges upon all who are planning sanatoria to build as economically as permanency and efficiency will permit. The Capital Issues Committee, Mr. Selden says, is opposed to the erection of "monumental" structures. Simplicity, economy and utility should be the watchwords. It is recognized, however, that the day has gone by when flimsy open shacks may be thrown up in all sorts of climates and tuberculosis patients expected to get well in them.

We are informed that more important than money, in the present emergency, are steel, labor and transportation of materials. Therefore, before giving its approval of any construction the Capital Issues Committee learns from the various government boards concerned whether steel, cars and labor are likely to be available for the proposed building.

The National Tuberculosis Association offers its assistance in the preparation and presentation of applications for approval by the Capital Issues Committee. Further information will appear in the October number of the JOURNAL OF THE OUTDOOR LIFE.